DOCUMENT RESUME

ED 214 094 CG 015 830

TITLE	Drug Education Curriculum: Grade Five. Health Education: Substance Abuse Prevention.
INSTITUTION	New York State Education Dept., Albany. Bureau of Drug Education.
REPORT NO	NYSED-81-9090
PUB DATE	Jul 81
NOTE	202p.; For related documents, see CG 015 825-833.
EDRS PRICE	MF01/PC09 Plus Postage.
DESCRIPTORS	Affective Behavior; *Cognitive Development; Communication Skills; Coping; Decision Making; *Drug Abuse; *Drug Education; *Drug Use; Elementary Education; Elementary School Students; Grade 5; Group Dynamics; Health Education; Humanistic Education; *Learning Activities; Problem Solving; Self Concept; *Skill Development; Teaching Guides

ABSTRACT

This curriculum guide, one of nine sequential manuals for elementary and secondary teachers and administrators, is designed to prevent drug misuse and abuse through activities for developing students' cognitive and affective skills. The materials emphasize the involvement of parents and community members and resources in implementing drug abuse prevention programs. The development of self-image and positive self-concept, communication skills, and coping skills comprise the three components of an affective model upon which this guide is based. The introductory section provides background information, e.g., curriculum evaluation, facilitator instructions, a topical outline of the curriculum, teaching methods, characteristics of early and late childhood, and an activity index. The format of the instructional units section consists of concepts, learning objectives and activities, and teacher information and resources. A preliminary materials list, worksheets, glossary of terms, and illustrations are also included. Activities for the fifth grade level focus on: (1) drug use and body balance; (2) drugs and society; (3) problem-solving and decision-making; and (4) group dynamics. The 14 appendices provide references on teaching methods, agencies, resources, packaged programs for health and drug education, materials of special interest to minority groups, and a chart of alternatives to drug use. (KMF)

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ED 214094

HEALTH EDUCATION: SUBSTANCE ABUSE PREVENTION

DRUG EDUCATION CURRICULUM

GRADE FIVE

U.S. DEPARTMENT OF EDUCATION
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ACKNOWLEDGEMENTS

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The Bureau of Drug Education extends special thanks to the voluntary review teams of school teachers who gave us reactions to draft materials and provided us with supportive and constructive criticism. The teams included: Gil Derle, Kay Devoto, Diana Haiken, Bette McGlynn, Fran Pertusi, Mary Ann Tuttle and Susan Weinstein of the North Bellmore School District; Stephanie Ginsburg and Steven Stein of the Valley Stream Central High School District; and Alan Weissman and Barbara Weissman, P.S. 216K, C.S.D. #21, Brooklyn.

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FOREWORD

This new Drug Education Curriculum Guide is one of nine separate documents - one for each elementary grade level, K-6, one for junior high, and one for senior high. The curriculum is intended for use in all of the schools, public and nonpublic, in New York State. It was developed as a direct result of the Board of Regents Action Plan to Reduce Alcohol and Drug Abuse in the Schools. The Plan was adopted by the Board in May 1979 in response to the problems of substance abuse which have and continue to be of great concern in our society.

The Curriculum provides school administrators, Health and Drug Coordinators and teachers with direct assistance in meeting the requirements of New York State Statute Chapter 982, 1977 (Education Law, Section 804) and insuring compliance with the Regulations of the Commissioner of Education, particularly Sections 135.1 and 135.3.

A cooperative school/community relationship is essential to the development of a comprehensive drug education program in which this new curriculum can be the foundation piece. While the curriculum can be implemented without extensive inservice education, an orientation workshop would be helpful and is recommended. The actual use of the curriculum will in itself be an inservice experience for the teachers.

It is generally acknowledged that the cost of substance abuse in our nation is enormous. A recent report of the U.S. Office of Drug Abuse Prevention estimates our annual cost to be: alcohol - $42.7 billion, tobacco - $25 billion, and drug abuse - $10.3 billion. While a large portion of these costs are appropriately targeted for treatment and rehabilitation, it is very important to focus more attention on the implementation of primary prevention programs. The logic of effective primary prevention as a means of reducing the costs of rehabilitation and treatment would seem to be self-evident; yet it is unfortunately often overlooked in assigning funds for the development and implementation of programs. While it is, and should be, a matter of priority that the afflicted receive our first attention, many of those not afflicted, if neglected, may soon join them. A majority of students in our schools today need help in acquiring some of the attitudes and skills included in this curriculum to enable them to be responsible for using substances wisely to maintain health.

In addition to this Drug Education Curriculum, the Bureau of Drug Education has prepared other supportive curricula and documents. These include: Alcohol Education Curriculum, Tobacco Education Curriculum, Elementary and Secondary Annotated Resource Guides and School Smoking and Drug Policy Guidelines. School authorities can obtain copies of these materials by writing to: Bureau of Drug Education, 960 EBA, Albany, NY 12234.

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THE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM

THE SCHOOL'S ROLE

Drugs are a part of everyday life in our society, and drugs and drug paraphernalia may usually be obtained by those who wish to use them. While there are many ways to approach the problem of drug misuse and abuse - through legislation; incarceration; controls on growing, manufacturing and marketing; increased supervision of young people, etc. -clearly the most effective approach is to remove the self-destructive and/or misdirected motivations of people who engage in drug misuse and abuse behavior.

While schools cannot achieve this goal alone, they can help lead the way. School drug education programs can promote and direct positive motivations in children through the integration of knowledge with affective skills development; also, schools are perhaps uniquely able to serve as catalysts for bringing communities together for a cooperative effort in a supportive environment.

As a cooperative school-community program progresses, participants will become aware that their efforts are not only leading them to make an impact on the problem of drug abuse among youngsters, but they are also producing healthy side-effects. These side effects have far-reaching implications for overall health, school achievement, improved attendance and reduced vandalism and delinquency. A new sense of pride and purpose grows among all those involved in, and affected by, the program.

SCHOOL RESPONSIBILITIES

All schools have several basic responsibilities for drug abuse prevention programs, as outlined by Education Law, Section 804, Commissioner's Regulations as they apply to all of Health Education, and the Regents Action Plan to Reduce Alcohol and Drug Abuse in the Schools. These include:

1. To provide all students, K-12, with an instructional program designed to develop the attitudes and skills required to make healthy decisions.

2. To involve students in activities that contribute to their sense of self-worth.

3. To insure that the instructional program is conducted by teachers with adequate preparation who provide healthy models for their students.

4. To integrate learning with related subject areas in a manner supportive of program objectives.

5. To coordinate in-school programs - education and service - for more effective drug abuse prevention.

6. To coordinate school programs with those offered by the community, cooperate with community agencies and utilize community resources to reinforce learning in both settings (school and community).

7. To develop, for general publication, written policies and procedures for handling all drug-related situations which may occur on school property. These policies and procedures should emphasize: 1) referral processes that

demonstrate a desire to help and rehabilitate students and faculty with drug-related problems and 2) "due process" for students or staff members charged with violations of school policies or laws.

8. To involve parents, students, community agency professionals and community leaders along with school staff in planning program policies and reviewing or participating in other aspects of the program.

OBTAINING SUPPORT FOR PROGRAM IMPLEMENTATION

Basic to the success of the school drug abuse prevention program is the support obtained from the school board, administration, parents, and the community at large. Where to begin is a judgment best made locally. Some suggestions regarding what to begin with may help you decide the most productive route in your district or school. Before you start, it is suggested that you have:

1. A clear understanding of the school's role in preventing substance misuse and abuse and of effective teaching methods for meeting this goal (e.g., an emphasis on positive self-concept and the development of life skills, with drug information presented within the context of affective objectives).

2. Statistics from recent surveys regarding drug misuse and abuse among youngsters on national, state and local (if available) levels.

3. A list of key people in the community whom you believe will be supportive.

4. Support from community agencies and experts. (It is a good idea to call or visit the March of Dimes, Council on Alcoholism, Community Mental Health Center, Drug Abuse Council and/or County Health Department, for example.)

5. A list of community, state and federal resources that can be used in the program. (See chart, p. x, for ideas.)

6. Ideas for promoting cooperative efforts to meet needs and fill possible deficiences.

PARENT AND COMMUNITY INVOLVEMENT

In a society such as ours, where young people are frequently encouraged to be independent and to make their own decisions, it is imperative that the school, the home, and the community cooperate in providing consistent and supportive policies, leadership and messages that guide youngsters rather than confuse or alienate them.

Such underlying causes of drug abuse as stress and anxiety, negative peer pressure, low self-esteem, inability to cope with emotions, and a lack of positive alternatives must be recognized and addressed concurrently in schools, at home, and in the community at large. Plans for action must compliment one another so that the youngster feels a sense of direction and consensus in communications with his or her teachers, parents or support people in the community on questions dealing with drugs or drug-related issues.

THE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM, CONT'D

The school can take the initiative in bringing together the domains of school, home and community to develop a comprehensive and well-coordinated drug abuse prevention plan. The plan should be based upon a statement of philosophy, which incorporates the following premise:

If our young people have:

- acquired basic concepts regarding health-related matters;
- a positive view of themselves and their ability to exercise a measure of control over their lives;
- family and friends to turn to in times of stress;
- fulfilling and supportive experiences in schools, families, and other social environments;
- experiences in making personal decisions based on their own values, and on the consequences of their behavior...

they are less likely to misuse and abuse drugs.

The success of even the best-planned school program will greatly depend upon the degree of cooperation and support which community, school and parent groups are willing to offer. The greater the amount of parent and community involvement, the more hopeful the school can be that its concentrated efforts will fall on fertile ground. Some specific ideas to insure parent and community involvement are:

1. The district/building Health or Drug Coordinator is primarily responsible for identifying community resources relating to drug abuse. This information should be compiled and made available to school staff.

2. Community agency personnel or other community professionals with an interest in drug abuse prevention should be encouraged to make presentations to the school board, school administrators and other appropriate audiences.

3. A Community Awareness Day: As soon as a district steering committee has been formed and resources have been identified for implementing the program, a Community Awareness Day should be planned. The main purposes of the Community Awareness Day are 1) to receive input from parents and community members regarding their needs, interests and concerns and 2) to establish a solid basis for follow-up meetings and plans involving those persons who are willing to make a commitment to the program. Since this introductory event can be crucial to the eventual success of the program, it must be planned carefully. Appropriate school and community personnel should be identified to present clear, accurate information on school and community drug-related issues and concerns. Roles and responsibilities for drug abuse prevention and education programs and the need for the involvement, cooperation and support of parents and community members must be emphasized. Questions or concerns that attendees are likely to raise should be anticipated, to gain a measure of control over what may be an emotional subject for many. Student representatives should be encouraged to attend to present their views and reactions.

4. Community professionals and parents should be invited to serve on school committees related to policy development, to program, to curriculum development and evaluation, and to materials review.

THE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM, CONT'D

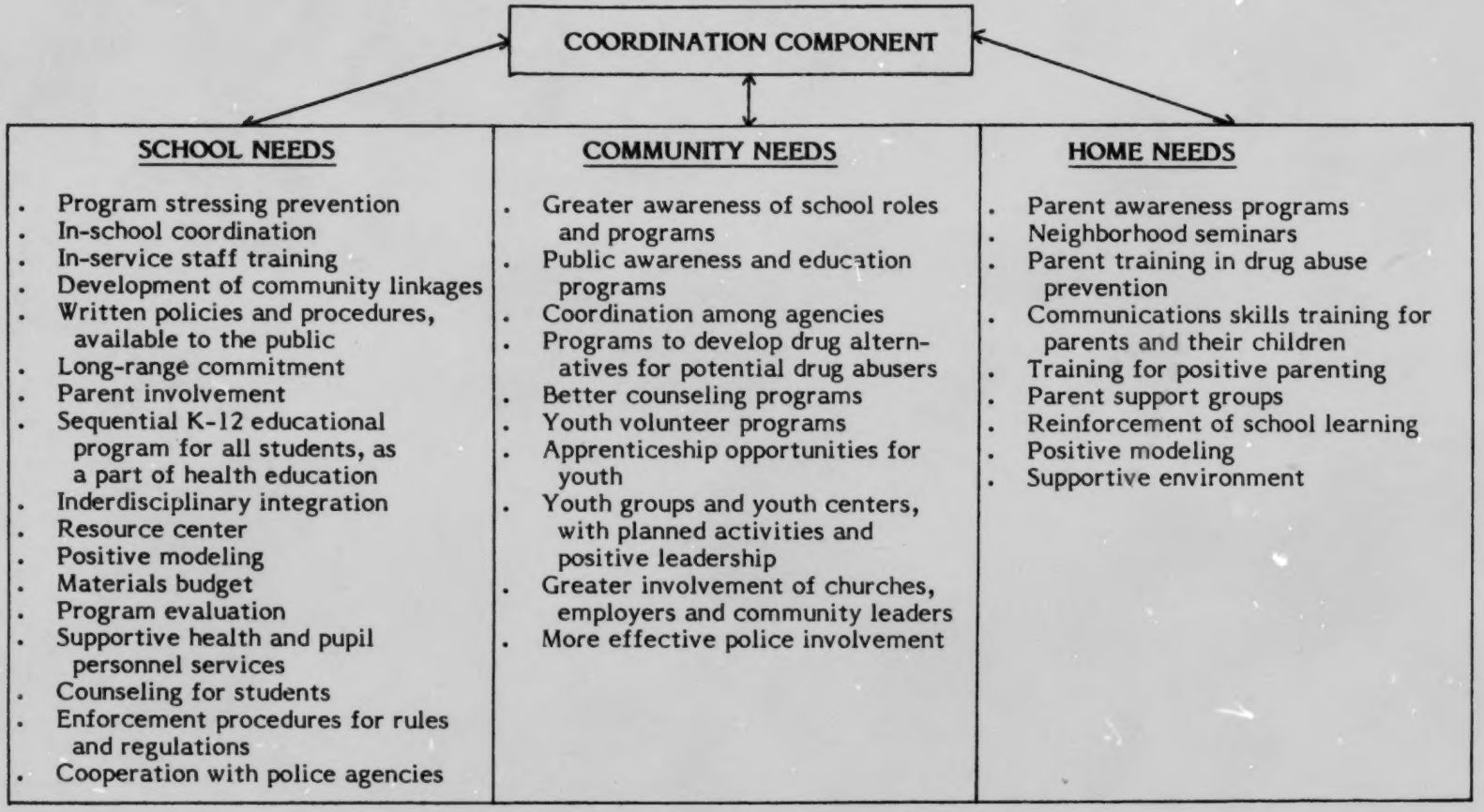
5. Student activities should extend beyond the classroom into home and community. Student surveys, interviews and research assignments provide ways to relate learning to life experiences. Student-produced audiovisuals, plays, demonstrations, debates, pamphlets, etc. can promote parent and community interest in and support for the program.

6. Parent groups should be enlisted to assist in identifying the needs of parents in the community, in obtaining resources to meet these needs and in getting parents and other community members involved in positive approaches to drug abuse prevention.

7. Parent education should be an integral part of the program. Many approaches can be used: take-home material, neighborhood seminars, adult continuing education classes, parent-child communication seminars and workshops in parenting skills, to name a few.

8. "Back-to-school nights" should be arranged to give parents an opportunity to observe classroom activities and student work related to drug education.

COMPONENTS OF A COMPREHENSIVE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM


COORDINATION COMPONENT
SCHOOL NEEDS
. Program stressing prevention
. In-school coordination
. In-service staff training
. Development of community linkages
. Written policies and procedures, available to the public
. Long-range commitment
. Parent involvement
. Sequential K-12 educational program for all students, as a part of health education
. Inderdisciplinary integration
. Resource center
. Positive modeling
. Materials budget
. Program evaluation
. Supportive health and pupil personnel services
. Counseling for students
. Enforcement procedures for rules and regulations
. Cooperation with police agencies
COMMUNITY NEEDS
. Greater awareness of school roles and programs
. Public awareness and education programs
. Coordination among agencies
. Programs to develop drug alternatives for potential drug abusers
. Better counseling programs
. Youth volunteer programs
. Apprenticeship opportunities for youth
. Youth groups and youth centers, with planned activities and positive leadership
. Greater involvement of churches, employers and community leaders
. More effective police involvement
HOME NEEDS
. Parent awareness programs
. Neighborhood seminars
. Parent training in drug abuse prevention
. Communications skills training for parents and their children
. Training for positive parenting
. Parent support groups
. Reinforcement of school learning
. Positive modeling
. Supportive environment

SOURCES OF HUMAN AND/OR FINANCIAL ASSISTANCE

* School District
* BOCES
* Local Government
* County Groups
* State Government
* Federal Government
* Health and Drug-Related Agencies
* Church Groups
* Service Groups
* Professional Organizations
* Colleges, Universities
* Chamber of Commerce
* Independent Business Groups
* Police Departments

PHILOSOPHY AND DESIGN OF THE CURRICULUM

The primary focus of the Drug Education Curriculum is prevention of drug misuse and abuse through combined cognitive and affective development. Research has shown that drug education programs which include objectives that enable students to:

- learn credible information;
- improve their self-concepts, (self-images);
- communicate effectively with others; and
- solve problems and make informed, responsible decisions

result in significant reduction of:

- referrals for drug-related activities and absences;
- instances of disruptive behavior among students; and
- instances of school property damage.

Research has also shown that information is a factor which influences values, problem-solving, decision-making and risk-taking behaviors. To influence behavior positively, however, information must be contained within the broader context of affective skills development.

The affective model upon which this curriculum is based has three components: The development of self-image and positive self-concept; the development communication skills; and the development of coping skills.

The Development of Self-Image and Positive Self-Concepts: Research demonstrates that young children exposed to affective educational activities and materials, designed to improve self-concept and acceptance of others, significantly improve their self-concepts. Individuals with poor self-concepts are more likely to misuse and abuse drugs than individuals with positive self-concepts. Significant reduction of drug use was also found among students exposed to humanistic education, which includes values clarification and values sharing programs. Current data suggests that values clarification and values sharing exercises have positive outcomes for drug abuse prevention education. The Drug Education Curriculum includes objectives and activities designed to improve self-concept, and acceptance of others. It also implements values clarification and values sharing at all levels.

Development of Communication Skills: Skills in effective interpersonal communication enable students to realize a measure of control over their lives and environment. These skills help them to express themselves clearly in a positive and acceptable way, listen actively to others, and share and accept thoughts and feelings as a part of meeting their own needs and those of others. They also help students to bridge communication gaps with parents and other authority figures.

The practice of non-judgmental interaction and sharing has been found to reduce drug use. Sharing thoughts and feelings in a supportive atmosphere enables students to broaden their awareness and acceptance of alternatives to drug use for changing feelings and meeting needs. Assertiveness skills help students resist the pressure of peers to behave in ways that are against their own better judgement. Skills in dealing with stress and pressure can prevent some students from turning to drugs for this purpose. The Drug Education Curriculum includes sequential attention to the development of these skills.

The Development of Coping Skills: Problem-Solving/Decision-Making. Research has indicated that problem-solving/decision-making processes can be taught effectively to fifth and sixth graders and that, in considering drug decisions, these students expressed healthy attitudes regarding drug use. One approach to decision-making is the force-field analysis. The force-field analysis has been identified as an effective means of teaching students to focus on pressures operating in a particular environment. The Drug Education Curriculum develops problem-solving/decision-making skills, including the force-field analysis, and integrates activities related to problem-solving/decision-making throughout the program.

Features of the Drug Education Curriculum:

1. The curriculum is designed for direct teacher use in the classroom, rather than as a reference document for a local writing committee. Thus it has been printed as nine separate booklets: seven for K-6, one for junior high and one for senior high.

2. The curriculum is a self-teaching and reference document, as well as a teaching guide, which includes background information, descriptions of teaching methods, suggestions for evaluation and the use of community resources and other helps.

3. The curriculum is sequential. While each grade offers a complete grade-level curriculum, following grades build on and reinforce previous grades without repetition beyond what is needed for review.

4. Concepts represent threads of continuity running through the entire K-12 program.

5. Objectives may be grade-specific, may be developed sequentially to build on a previous grade, or may skip one or more grades, then reappear for review or more sophisticated development. Objectives are worded behaviorally and measurably.

6. Few activities are repeated, although similar experiences are provided on several levels. An effort has been made to include alternate activities - basic and more advanced, individual and group, those that require materials or audiovisuals and those that do not - wherever possible, to meet the varying needs of classroom teachers, and their students.

7. Activities requiring films, storybooks or other materials which must be purchased (other than essential references) are designed to be supplementary rather than basic to the curriculum.

8. Of the materials listed for each grade, only a few basic references and soft material supplies are required to implement the curriculum. Worksheets for teacher duplication are included for each grade. Information sheets, story pictures and patterns are also provided.

9. A column at the right-hand side of each curriculum page provides the elementary teacher with a reference for subject integration of material and the Health Coordinator with suggestions for coordinated efforts with teachers of other subject areas at the secondary level.

10. At the end of each concept, a Culminating Concept Evaluation Activity is included to provide the teacher with feedback from students relating to each completed section.

11. A tear-out Evaluation Form at the end of the guide allows the teacher to become a participant in State level assessment and revision of the curriculum.

The district/school Health or Drug Coordinator is primarily responsible for insuring that teacher selection of activities and resources is coordinated sequentially. The district/school Health Education Curriculum Committee may also choose to adapt the curriculum to local needs and resources through Committee selection, in consultation with teachers, of grade level activities and materials.

CURRICULUM EVALUATION

Evaluation is built into the Drug Education Curriculum, and occurs as the teacher develops a unit as well as at the completion of a unit. During evaluation, information is gathered which focuses on the program, the student's learning and progress, the classroom environment, and the curriculum content. The feedback received can be used to shape the course of study to better suit the needs of teachers and students.

A variety of methods have been used in this Drug Education Curriculum to help gather evaluation data:

1) **The curriculum is designed to be self-evaluative.** Objectives are written in measurable terms and activities are designed so that their completion involves students as active, observable participants. Thus observation of student behavior frequently provides the teacher with a means to assess student progress and goal attainment. Extra support can be provided for those students who experience difficulty with specific activities or in achieving specific objectives.

2) **Record-keeping** is suggested after the development of each concept throughout the curriculum. These records should reflect the progress of the students. Attitudinal learning activities can be augmented for those students who require support in order to achieve the defined behaviors. Teachers are also encouraged to note activities which were received with enthusiasm and those which required further development. The curriculum is personalized and shaped to meet the needs of most teachers and students.

3) **Culminating Concept Evaluation Activities** are included in the curriculum. Cognitive tasks, including paper and pencil activities, are used to evaluate content learning. Question activities are written which require students to respond at different cognitive levels. Questions of knowledge, application interpretation, analysis, and synthesis are used to make the paper and pencil tasks more interesting and viable. Open-ended evaluation sheets for students to complete are also included at each grade level. Students are invited to actively participate in providing feedback about information and activities. In this way, the curriculum is shaped by the students to meet the needs of future students.

4) A tearout **Evaluation Form** is provided at the back of each curriculum booklet. Teachers are asked to fill out this form when they have completed their Drug Education Unit and return it to the Bureau of Drug Education, New York State Education Department. The form solicits the reactions of teachers to the Curriculum Guide and opinions which students provided through evaluation activities in the curriculum. These forms will be used by the Bureau to guide the preparation of future guides.

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TO THE TEACHER: HOW TO USE THIS GUIDE

Each grade level Drug Education Curriculum Guide is divided into three sections: 1) an introductory section, 2) instructional units and 3) appendices.

The **INTRODUCTORY SECTION** provides teachers with necessary background information for the successful implementation of the instructional program. Introductory material is page-numbered with lower case Roman numerals.

The **INSTRUCTIONAL UNITS** include a preliminary materials list and three to four concepts, each with two or more objectives, sequentially arranged, and one or more activities per objective. Accompanying worksheets, illustrations, etc. are contained within the instructional units.

The **APPENDICES** include reference information related to teaching methods, agencies, resources and supplementary guidelines. Each guide contains the same set of appendices.

A **GLOSSARY** of terms is included in grades 5 - Senior High.

It is recommended that teachers use a procedure similar to the following when using this guide:

- Read through the introductory section to gain a thorough understanding of the task to be undertaken, not only within the classroom, but also on a broader scale.
- Scan the instructional units and appendices to get an overview of what they include.
- Identify any weaknesses in personal preparation for teaching basic material and initiate plans to help strengthen these weaknesses.
- Talk to other teachers, staff, etc., to gain perspective on district goals and plans or to stimulate the development of these where they are in need of augmentation or revision.
- Discuss with previous and later-grade teachers, and with the Health Coordinator, the objectives that need emphasis in your particular grade or class, to insure that district priorities are met, that the K-12 program has continuity, that your time is used efficiently and that related subjects are taught in a manner supportive of the curriculum.
- Plan your activity schedule. Determine the time available by reference to district priorities, the total school health curriculum, identification of overlapping objectives with other areas of health and possibilities for integration of material with other subjects.
- Based on the characteristics of the class, the materials available to you and your personal judgement, select the activities you will use from those suggested. Note that each concept includes a Culminating Concept Evaluation Activity at the end. Where this is to be used, students need to be involved in activities that will enable them to perform the required task.
- Meet with the school librarian or resource center supervisor to discuss materials required. Determine if they are already available or if they may be acquired and how long it will take to acquire them. This should be done several months before the materials are needed, as some distributors, such as the National Clearinghouse for Drug Abuse

Information, require some time to respond to orders. Of course, district deadlines for spending must also be considered. If all teachers can consolidate and prioritize their materials requests before submission to a librarian or purchase agent, it will insure fairness, and identification of those materials most important to the program.

- Enlist the help of the Healthor Drug Coordinator to identify the resource persons and agencies you will use and call, write or visit them--whichever is most appropriate--to discuss your needs and mutual schedules. This is best done as a cooperative activity of all relevant school staff, coordinated and assisted by the Health Coordinator.

Teachers will recognize many of the concepts and objectives contained in this curriculum as basic to the development of the child and preparation for life and learning in its broadest sense. The goals of positive self-image, self-confidence, self-discipline and self-motivation for students should permeate all school programs and every teaching-learning situation; they should not be seen as "drug education" or "health education" goals alone. They are specifically and purposefully expressed and integrated here, because educational research has demonstrated that drug education programs which focus primarily on content, without adequate attention to motivations and other psychosocial factors, are not effective in preventing drug misuse and abuse. Content-oriented drug education programs may even promote student involvement in the drug scene.

The attitude a teacher conveys makes a deeper and longer-lasting impression on students than all the factual statements in a text or pamphlet. We all teach more by the kinds of people we are than by the teaching we do; no matter what content the teacher is teaching, the student is feeling an emotional response and learning an attitude as well. Experiences gained in a positive, motivating atmosphere produce lasting, positive effects on students. Teacher awareness of these factors can greatly increase the long range effectiveness of any instructional program.

A SAMPLING OF TEACHING METHODS

The methods you use in drug education will make all the difference between classes that are boring, alienating and ineffective in preventing drug-related problems and classes that will get students actively involved in learning and doing things that will give them the facts they should know to make responsible decisions about drug use, while helping them to develop an understanding of health, motivations and behavior.

A variety of methods will make it easier to adapt to individual differences among students. No one method or procedure is suited to every objective or purpose, i.e. a method that is appropriate in one learning situation may not work in another.

The following teaching methods are offered as a pedagogical assortment from which the teacher may choose and adapt those best suited to his or her talents, the classes taught, and the objectives selected.

FEELING CIRCLE

The Feeling Circle is particularly useful with elementary pupils. It can be used as a sharing or problem-solving method for the class, a group or an individual pupil. A small group sits in a circle, usually with the teacher as discussion leader, sharing reactions and ideas.

The feeling circle gives the teacher an opportunity for developing pupil skills in self-expression, listening to others, taking turns, attending to and remembering what was said, and learning to think before they speak, among others. Pupils learn, as a result, to express their feelings, needs and ideas in ways that are socially acceptable and thus effective for them.

BRAINSTORMING

Brainstorming can be used to teach students to respect and build on their own and others' creative abilities and to acquire the experimental frame of mind necessary for effective problem-solving. Brainstorming develops an awareness of a range of possible alternatives, often bringing out some very useful suggestions. An important element of brainstorming is that the students themselves have provided the suggestions: they are active participants in the learning experience.

Brainstorming can be done as a full class or small group activity. The procedure is described below. It is suggested that the teacher introduce the process to students using a simple example, such as the one given in #3.

1. Introduce the topic of brainstorming. It can be described as a first step in problem-solving - a method for getting out the maximum number of ideas for consideration. Emphasize that the only rule is to spill out ideas as quickly as possible, without discussion of your own thoughts or the thoughts of others.
2. Divide the class into random groups of three to five students. Each group should have paper and pencil or pen. Have each group select a recorder.
3. Instruct the groups to think of as many ways as they can to celebrate a birthday. The recorder lists these on the paper.

4. Give the groups ten minutes to record their ideas. (If any groups lose steam ahead of time, encourage them to keep trying).
5. Ask each group to choose its two most important ideas to be shared with the entire class.
6. Post the lists so that everyone can see how many ideas emerged in a short time.
7. Decide which ideas can be put into effect.
8. Select a planning committee to combine ideas.

As a followup to the activity, ask the class the following questions:

1. Was this a good way to get people to listen to your ideas?
2. Were many good ideas expressed?
3. Can you think of other times we might use this method of sharing ideas in the class?

LECTURE-DISCUSSION

A drug education program that relies heavily on lectures, whether presented by the teacher, an outside resource person or through media, will not be effective in meeting the goals of prevention. When used properly, however, the lecture-discussion method may be the best way to handle a particular objective.

Lecture-discussions may be used to present case studies, hypothetical situations, critical issues or other motivating topics to arouse student interest and set the stage for student activities that follow. Demonstrations may also be included, such as one given by hospital personnel of life-saving techniques. Wherever possible, background information about drugs and drug-related topics should be researched by the students themselves, rather than presented in lecture format by the teacher. The teacher's role is to guide student activity, raise questions and evaluate student progress.

DISCUSSION

Discussion has several purposes: to develop interest in a new topic; to test understanding, concepts and experiences; to exchange opinions and viewpoints; to develop critical thinking, critical listening, and clear discourse; and to facilitate awareness of misleading, irrelevant, and false statements.

Either the teacher or a qualified student may take the leadership role in initiating and facilitating discussion. The teacher should respect each student's beliefs and encourage the expression of personal opinions, while also encouraging students to listen carefully and thoughtfully to the views of others. The teacher should accept rather than judge statements that are emotionally-based, question erroneous statements and make authoritative references available to the students.

FISH BOWL

The Fish Bowl is a technique that enables the classroom teacher to create a small group experience without losing the attention of the class. All the students have an opportunity to get involved, have their say, hear how others perceive a situation and decide on a mutually acceptable solution in an orderly, democratic fashion. The procedure for Fish Bowl is as follows:

Step 1. The teacher asks for six volunteers to sit in a circle in the center of the class. (Bean bag chairs are especially good for this activity.)
Step 2. A seventh chair is placed within the circle.
Step 3. The rest of the class stands or sits around the outside of the circle and chair.
Step 4. The six volunteers discuss the problem and say whatever they want to say, while the rest of the class listens.
Step 5. A student on the outside who wishes to say something must sit in the empty chair and wait to be recognized by one of the others in the fish bowl. Once recognized, this student can briefly state whatever s/he wants to add, clarify or question, then must vacate the chair for someone else.

Possible class problems that could be solved using this activity include cheating, stealing, loyalty, breaking rules, and interfering with the rights of others.

PROBLEM-SOLVING/CONFLICT RESOLUTION

Learning to resolve a conflict situation between individuals, an individual and a group, or between groups, without sacrificing one's identity, self-respect or control over one's life can be one of the most important life skills anyone can learn. To arrive at a solution to a conflict that is mutually agreeable and allows everyone involved to feel satisfied, one must learn how to communicate without demeaning another. The problem-solving methods described below can be used in any conflict situation to help acquire decision-making skills.

Traditional Model for Problem-Solving:

Step 1. State the Problem: Participants state the problem as they see it and how they feel about it without blaming, criticizing, judging or shaming.
Step 2. Define the Specifics of the Problem: Participants then note the points of agreement and disagreement.
Step 3. Brainstorm All Possible Solutions: Participants contribute as many ideas as possible to how the conflict may be resolved, to create awareness that there may be a number of ways to deal with the problem.
Step 4. Identify the Consequences: Participants select the most suitable situations from the list they brainstormed and outline the consequences of each.
Step 5. Choosing a Solution: Finally, participants evaluate suitable solutions and consequences and agree on one solution that is acceptable to all.

Force-Field Analysis Model:

Another process that can be used in conflict resolution is the force-field analysis. In any conflict situation there are opposing forces. Some of these forces help an individual to move toward a desired goal. Other forces may interfere with goal attainment. In a force-field analysis, the individual analyzes the forces that are operating, examines advantages and disadvantages of courses of action, evaluates them, and decides whether or not to pursue the goal. The steps in using the force-field analysis include:

Step 1. Divide a piece of paper into four columns.
Step 2. In the first column, write the conflict or problem which exists.
Step 3. In the fourth column, write the goal that you wish to reach.
Step 4. In the second column, list the forces (advantages) which operate to support goal attainment.
Step 5. In the third column, list the forces (disadvantages) which operate to interfere with goal attainment.
Step 6. Identify the consequences of each advantage and disadvantage.
Step 7. Evaluate the advantages and disadvantages in terms of gains and risks.
Step 8. Choose a plan of action that includes goal attainment, rejection of the goal, or changes in the goal as originally stated.

ROLE-PLAYING

Students assume different roles and improvise dialogue as they act out a problem situation. Role-playing provides an excellent method for helping students learn about their own attitudes and behaviors and find new ways of dealing with problems. As a followup to a role-playing activity, discuss what occured in the role-play and how everyone felt about the interactions. This method may be used in small groups, or with one small group role-playing before the class.

DRAMATIZATION

Students act out stories, dramas, skits or situations written by a teacher, student or author. Dramatization is used to illustrate how other people have dealt with different problems or situations. As a followup to this activity, discuss what happened, student reactions and what they might have done differently from the characters in the drama. This method is best used as a supplement to other forms of instruction and should be selected and evaluated on the basis of its educational potential, not its entertainment value.

PLAYS AND STORIES

A group writing project may include an entire class. Students should be given a pertinent theme; the play or story should teach a concrete lesson in a practical situation. Acting out the plays or stories provides additional experiences geared toward the learning goals. Plays and stories may be enhanced by being open-ended, allowing students to provide alternative answers or endings.

SENTENCE STEMS

Sentence stems are found in a number of places in the curriculum, but may also be created by the teacher or by students. The purpose of a sentence stem is to draw out a reaction, facilitating self-expression and communication. Sentence stems may be used as discussion starters; to increase awareness of individual similarities and differences; or to obtain class reactions to activities, events, etc. A very useful sentence stem for evaluation of a curriculum activity is the "I learned..." statement, which students may complete at the end of the activity.

A SAMPLING OF TEACHING METHODS, CONT'D

RESEARCH

All students need to learn the skill of accessing accurate, reliable information as a basis for making decisions throughout life. While research activities should not become a major focus of the curriculum, it is necessary for students to learn where to go to obtain information on a topic, how to interpret what they read (or hear), and how to communicate to others what they have learned. Research activities should make students aware of a broad range of information sources - community and government agencies, people with specific expertise, newspapers, government reports, journals, books, pamphlets, television and encyclopedias. The information students obtain can be shared through oral or written reports, discussions or student-constructed visuals.

INTERVIEWS

Interviews are a learning technique in which a small number of selected individuals are questioned on a specific topic. Since the purpose of an interview is to obtain, record and report opinions and information accurately, students learn social and communication skills through this process. Where interviews involve family or friends, students frequently gain insights regarding human behavior which they may not have obtained in less-controlled circumstances.

Teacher direction and asistance may be necessary to help students form clear, unbiased and relevant questions for their interviews, and interpret objectively the information obtained.

SURVEYS

Individuals, committees, or the entire class may conduct surveys. Each step in planning and carrying out a survey has potential educational value. Ideally, a survey should lead to action if the results show that action is needed. This ideal may not always be realizable in the classroom situation, but awareness of community needs is at least sharpened. A survey involves preplanning, collecting, analyzing, interpreting and evaluating data and reporting the findings to the class.

The teacher's role is to guide the students so that they will secure the information they are seeking and interpret and evaluate it correctly. If oral or written questionnaires are used, the teacher's help may be needed to ensure clarity and ease of administration and tabulation. When community facilities are visited, proper prearrangements should be made and a follow-up thank-you letter sent. If students plan to evaluate their findings, care should be taken that the criteria used are sound.

(Note: If a sophisticated study is planned, it is suggested that teachers use school and/or community expertise in sampling, analyzing and interpreting information.)

EXPERIMENTS AND DEMONSTRATIONS

Experiments may be performed by students or demonstrated to the class by the teacher or a resource person. Preplanning for experiments includes: making scientifically sound selections that are in line with the purpose of the lesson and with the maturity of the students; obtaining necessary materials and equipment; and anticipating questions about the results. These activities should be coordinated with the science program to prevent duplication.

SELF-CONSTRUCTED VISUAL AIDS

Aside from providing a useful outlet for creativity and originality, self-constructed visual aids enliven instruction and help clarify, simplify, emphasize, interpret, and reinforce learnings. Symbolic representation of data may be used through charts, tables, diagrams, maps, graphs, posters, cartoons, diagrams, mobiles, and combinations of these. Charts, tables, graphs, and maps are effective in disseminating information in a compact form while posters and cartoons, by their potential emotional impact, justify their use in the classroom because of their potential influence on attitudes. Student-constructed visuals may also play a major role in reinforcing the program outside classroom walls, obtaining needed community support for the program.

LEARNING CENTERS

Grades 2-6 of the Drug Education Curriculum each contain a set of learning center activities.

A learning center consist of a series of child-centered stations, each of which develops skills and knowledge around a specific topic. Students are active, independent learners as they work through interesting activities prepared for them at their level.

Every learning center has the following elements:

1. Name reflecting the topic of the center.
2. An attractive attention-getting, visual presence.
3. Tasks written on activity cards in a clear, concise manner explaining to the students what they will do and how they will do it.
4. Materials needed for the tasks.
5. An evaluation and record-keeping system to monitor pupil progress.

The learning center can be constructed on a bulletin board, or separate tables can be used as task centers. At least one table is necessary to hold resource materials, task-related materials, and completed projects.

Students can work through learning centers independently or in groups. Students may complete all tasks, or just certain tasks, depending on the directions given by the teacher. They may work at a center during an assigned time or whenever they have free time. The methodology is flexible and can be readily adapted to suit the needs of students and teacher.

TOPICAL OUTLINE OF THE DRUG EDUCATION CURRICULUM, K-12

In the outlines presented on the following pages, Roman numerals represent topics addressed by curriculum concepts and letters represent the topics addressed by objectives under these concepts. The purpose here is to give an overview of the major topics and their sequence in the curriculum, rather than an outline of concepts and objectives, making quick reference and comparisons relatively easy.

KINDERGARTEN

I. Self-Image, Feelings and Tolerance
   - A. Identifying and expressing feelings
   - B. Ways we are each unique
   - C. Ways we are the same
   - D. Accepting feelings of others

II. Group Membership
   - A. Family membership
   - B. Responsibilities toward family members
   - C. Group participation
   - D. Need for rules

III. Responsibility for Health
   - A. Safe vs. unsafe things to eat
   - B. Health helpers
   - C. Health decisions

GRADE ONE

I. Self-Image and Communication Skills
   - A. Expressing uniqueness
   - B. Identifying situations that make us feel important
   - C. Recalling and sharing success experiences
   - D. Sharing and accepting feelings
   - E. Sharing and accepting decisions

II. Responsibility for Feelings and Actions
   - A. Responsibility for feelings
   - B. Identifying uncomfortable feelings
   - C. Handling unpleasant situations

III. Making Healthy Decisions
   - A. Safe use of substances
   - B. Recognizing poisons
   - C. Rules regarding dangerous substances
   - D. Making healthy choices

GRADE TWO

I. Making Choices to Meet Needs
   - A. Needs vs wants
   - B. Forming habits

II. Self-Image, Social Interactions and Responsibility
   - A. Responsibility for feelings and actions
   - B. Family membership and support
   - C. Class membership and support
   - D. Solving classroom problems
   - E. Importance of classroom rules
   - F. Setting rules and determining consequences for breaking rules

III. Body Balance and Health
   - A. Definition of balance
   - B. Feeling body balance
   - C. Body parts and functions
   - D. Maintaining a healthy body

IV. Wise Use of Substances
   - A. Identifying well vs sick feelings
   - B. Definition of medicine
   - C. When to take medicine
   - D. Persons from whom we should take medicine
   - E. Rules for taking medicine

GRADE THREE

I. Self-Image and Responsibility for Decisions
   A. Improving our own self-images
   B. Feelings about success
   C. Risk-taking, alternatives and consequences
   D. Changing decisions
II. Group Dynamics
   A. Speaking and listening in groups
   B. Supporting group members
   C. Ways of solving group problems
   D. Making a group decision
III. Body Balance and Health
   A. Body systems and functions
   B. Relating body balance to internal and external body environments
   C. Feelings which affect balance
IV. Assuming Personal Responsibility for Health
   A. Habits affecting present and future health
   B. Importance of assuming personal responsibility for health
   C. Setting personal goals for protecting health

GRADE FOUR

I. Appropriate Uses for Drugs
   A. Definition of "drug"
   B. Differences among prescription, over-the-counter and illegal drugs
   C. Medical uses for drugs
   D. Prescriptions
   E. Labels
   F. The pharmacy
   G. Comparing contemporary medications with past medications
II. How Emotions Affect Health
   A. Awareness of emotions
   B. Feelings that bring discomfort
   C. Sickness as a means of dealing with problems
   D. Ways to change emotions
III. Communication Skills and Problem-Solving
   A. Practice communication skills
   B. Responsibility for feelings
   C. Practice problem-solving
   D. Risk-taking, consequences and alternatives
   E. Solving dilemmas
IV. Setting Personal Health Goals
   A. Importance of learning facts before making decisions
   B. Identifying habits hazardous to health
   C. Importance of valuing health
   D. Setting personal goals and recording progress

GRADE FIVE

I. Drug Use and Body Balance
   A. How various categories of drugs affect body balance
   B. Differentiating use, misuse and abuse of drugs
   C. The cycle of dependency and tolerance
   D. Reasons for substance misuse and abuse
II. Drugs and Society
   A. General advertising techniques
   B. How advertising influences drug-buying
   C. Techniques used to sell drug products
   D. Prevalence of drug use
III. Problem-Solving and Decision-Making
   A. Comparing and choosing techniques
   B. Implementing decisions assertively
IV. Group Dynamics
   A. Friendships
   B. Peer groups
   C. Dependency needs
   D. Listening skills in group situations

GRADE SIX

I. Drugs and Human Needs
   A. Valid sources of information
   B. Psychoactive drug classifications
   C. Marijuana (Learning Center)
   D. Relationship of needs to substance abuse
II. Personal Decisions Regarding Drug Use
   A. Relating maturity to ways of handling feelings
   B. Feelings and attitudes affect decisions
   C. Evaluating decisions regarding psychoactive drug use
   D. Double standards
   E. Setting personal goals for maintaining health
III. Drugs and Society
   A. Substance use and alternatives in managing daily problems
   B. Substance misuse and abuse as concerns of society
   C. Controls on the purchase, possession and use of substances
IV. Alternatives to Drugs
   A. Mood changes as a part of everyone's life
   B. Identifying things to help us feel good
   C. Risk-taking, consequences and alternatives
   D. School and community resources

TOPICAL OUTLINE OF THE DRUG EDUCATION CURRICULUM, K-12, CONT'D

JUNIOR HIGH

I. Maintaining the Homeostasis of the Body
   A. Environmental factors
   B. Psychoactive drugs
   C. Prescription and over-the-counter drugs
   D. Drugs and pregnancy
II. Drugs and Society
   A. Advertising and drugs
   B. Legal aspects of substance use, misuse and abuse
III. Motivations for Drug Use
   A. Individual reasons for using or abusing drugs
   B. Progression from experimentation to abuse
   C. Effects on performance
   D. Reasons for continued drug use by individuals
   E. Constructive alternatives
IV. Communication Skills
   A. Importance of clear communication
   B. Practice communicating feelings and needs
   C. Practice listening and receiving messages
   D. Dynamics of peer pressure and drug use

SENIOR HIGH

I. Effects of Drugs on the Homeostasis of the Body
   A. Major classes of drugs (review)
   B. Effects of drugs on the neuron and the brain
   C. Tension and body balance
   D. Substance use and body balance
   E. Drug interactions
   F. Drug dependence, tolerance and withdrawal
   G. Drugs and driving
   H. Drugs and pregnancy
II. Drugs and Society
   A. History of drug use
   B. Relationships among industry, controls and society
   C. Social policies regarding drug use
   D. Effects of drug abuse on society
   E. Viewpoints
III. Communication Skills:
   A. Stating feelings and needs constructively
   B. Communication dynamics in groups
   C. Communication dynamics in relationships
   D. Effects of substance abuse on relationships
IV. Motivations and Alternatives
   A. Changing moods and feelings
   B. Identifying alternative activities
   C. Dealing with distress and pressure
   D. Practice solving problems
   E. Decisions influencing life style and life span
   F. Developing a life-long model for health
   G. Identifying sources of help and support in the community

CHARACTERISTICS OF EARLY AND LATE CHILDHOOD

Early childhood extends from two to six years, and late childhood extends from six years to the time of sexual maturity. The period of childhood is marked by growing independence. As the child leaves the home environment and enters school, new expectations and pressures result in changes in patterns of behavior, attitudes and interests.

EARLY CHILDHOOD

Certain characteristics of early childhood set it apart from other periods. Perception dominates thinking. In order to learn that things are not always what they appear to be, the child reaches out to touch and to experience people and objects in the environment. Rapid developments in language patterns and vocabulary help the child to communicate freely with peers and adults, and permit the child to express personal experiences and ideas about family and possessions.

As the child is placed in play and work groups, the needs and ideas of others begin to counteract the egocentrism and self-involvement characteristic of this period. Cooperative play evolves, and the child learns that sharing gains social approval and emotional support from peers and teachers.

Early childhood represents a period of heightened emotions. Children feel they are capable of accomplishing more than they are permitted to do. Anger and frustration develop when they are thwarted in their attempts to reach a goal. Children express spontaneously their emotions - anger, fear, jealousy, joy, affection, sadness - and need to be given time to share these feelings with their peers. Role-playing, creative dramatization, identification with storybook characters and simple discussion help children to express their feelings, and understand the feelings of others.

LATE CHILDHOOD

Late childhood corresponds to elementary school age. It is the time when the child is expected to acquire the foundations of learning that are considered essential for successful adjustment to later life. Failure to master the tasks assigned to this period results in feelings of inferiority and insecurity. Self-help skills (caring for personal needs), social skills (respect for others), school skills and play skills are developed. The child moves through a period of concrete operations where language is used increasingly to represent experiences and ideas. Listening, speaking, reading and writing develop rapidly as the child learns from adults, peers, books, magazines, television - everything in the environment.

The period of late childhood has been called "The Gang Age." Play groups are formed in which members are usually of the same age, sex and grade level. The child eats lunch, plays games and sports, and moves through the neighborhood and school with this special set of peers. Within the group, there are frequently shifting patterns of leaders and followers, and quarreling, boasting and bossiness are frequent verbal behaviors. It is a time of strenuous physical play where skill is held in esteem.

Children who are not accepted as members of a group must frequently find solitary amusements. Because social acceptance is a central role in the child's life, the degree to which the child feels accepted or rejected can influence social patterns now and in later life.

As the child matures, more control over the outward expression of emotions occurs. Acceptable and unacceptable forms of expression are assimilated, although concepts of positive and negative behavior are generalized to new situations. Misbehavior at school and with friends is used to win peer approval and to assert independence from adult authority. Older children are aware of religious, social and socio-economic status, and usually accept the cultural stereotypes passed to them by adults toward these situations. Only through exposure to alternative ideas and attitudes can the child clarify personal values.

During childhood, the child is expected to assume added responsibilities in school and at home, and success in handling responsibilities (especially those which significant people consider important) will add to a sense of well-being. Achievement, acceptance by others, and affection will help the child experience security and happiness during these formative years.

DEVELOPMENTAL TRAITS 5-8 YEAR OLDS (GRADES K-3)

1. By the age of 6, the average child has attained 43% of physical adult size while the brain and central nervous system have attained 90% of their size. Of course growth of the child will continue to occur, but the increments will be much smaller.
2. The children of this age group are now beginning and will continue to learn skills for ordinary games. Socialization with peer groups in game situations is important, as is socialization in the classroom setting.
3. It is at this time that children begin to formulate and develop conscience, a sense of morality, and a scale of values. By the age of 11 or 12, these items will be well-ingrained into the personality of the child and are likely to remain relatively unchanged.
4. The learning of culturally appropriate psychosexual roles begins to take place in earnest during this time period.
5. The achievement of personal independence begins to take place. The child entering school experiences a suddenly expanded "world" -- from his or her home to the neighborhood, then to the community. No longer is the child content to remain in his or her previous world, namely home and family.
6. The child will begin to evaluate himself/herself in terms of the school standards and the standards of his or her school peers. Self-concept will be modified from the image set previously by his or her parents and siblings. This receptiveness makes the child amenable to "affective" health education, an occasion perhaps never to be duplicated in later years.

DEVELOPMENTAL TRAITS OF 9-12 YEAR OLDS (GRADES 4-6)

By the time a student reaches the 4th grade, he or she is most likely to:

1. Show an increasing concern for group recognition and approbation.
2. Reject standards of home in favor of those of peer group or a clique.
3. Become a member of some secret society or social club.
4. Fluctuate between a need for independence and for dependence.
5. Be inconsistent and variable in regard for parents.
6. Be torn between loyalty to home and allegiance to peers.
7. Take good health for granted and become concerned only on those occasions when an illness threatens to interfere with activities.
8. Lack maturity of judgment.
9. Greatly increase interest in facts of all kinds and show a desire to extend intellectual as well as physical horizons.
10. Be critical of explanations of scientific phenomena, often demand evidence, and be alert to the claims of propaganda.

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GRADE FIVE

MATERIALS LIST

TEACHER REFERENCES: The following are examples of references that provide further background, additional activities or reference information. It is expected that this suggested list will be modified by teachers as they work with the curriculum. Prices are subject to change.

DRUGS:

Evans, Wayne O., Ph.D. and Jonathan O. Cole, M.D. Your Medicine Chest. A Consumer's Guide to Prescription and Non-Prescription Drugs. Boston, MA: Little, Brown and Company, 1978. $5.95.

Girdano, Daniel A. and Dorothy Dusek. Drug Education: Content and Methods. Reading, MA: Addison-Wesley, 1980. $9.95.

Marijuana and Health. Eighth Annual Report to the U.S. Congress from the Secretary of Health and Human Services. Washington, D.C.: Superintendent of Documents, 1980. $3.00.

Ray, Oakley. Drugs, Society and Human Behavior (Second Edition). St. Louis, MO: C.V. Mosby, 1978. $14.50. (Recommended).

AFFECTIVE EDUCATION:

Canfield, Jack and Harold C. Wells. 100 Ways to Enhance Self-Concept In the Classroom. A Handbook for Teachers and Parents. Englewood Cliffs, NJ: Prentice-Hall, 1976. $11.95.

Schaif, Peter, William McCoy and Diane Ross. Growing Up Moral: Dilemmas for the Intermediate Grades. Minneapolis, MN: Winston Press, 1979. $5.95.

Simon, Sidney B., Leland W. Howe and Howard Kirschenbaum. Values Clarification: A Handbook of Practical Strategies for Teachers and Students. (New Revised Edition) New York: A & W Publishiners, 1978. $6.95.

Stanford, Gene. Developing Effective Classroom Groups. A Practical Guide for Teachers. New York: A & W. Publishers, 1977. $6.95.

SOURCES OF PAMPHLETS: The following are suggested as sources of pamphlets on drugs and drug abuse. Since prices may change, a publications list should be initially requested.

Channing L. Bete Co., Inc., Greenfield, MA. 01373. Toll free orders: 800: 628-7733. (Suggested titles: Scriptographic Booklets: "About Drug Abuse;" "Drugs and You;" "Your Imagination." 1-24 copies, 75¢ each; reduced prices on higher quantities.)

Do It Now Foundation, P.O. Box 5115, Phoenix, AZ. 85010. (Suggested title: "All About Downer Drugs," 15¢ each; 10/90 cents; 100/$6; 1000/$50.)

Drug Enforcement Administration, U.S. Department of Justice, 1405 I Street, N.W., Washington, DC 200537. (Suggested title: "Drugs of Abuse." Single copy free.)

National Clearinghouse for Drug Abuse Information, 5600 Fishers Lane, Rockville, MD. 20857. Send for Publication Status Checklist to determine current availability of publications and ordering instructions for specific titles. (Suggested titles: "Catching On;" "Got A Minute?;" "Inhalants," English or Spanish; "La Prevencion del Abuso de Las Drogas;" "What Do They Call It Again?", English or Spanish. Single copies may be free.)

Superintendent of Documents, U.S. Government Printing House, Washington, D.C. 20402. (Suggested titles: "Drug Abuse Prevention for You and Your Friends," SN 017-024-00740-4, $1.10; "This Side Up," SN 017-024-00776-5, $2.20, $125/100 copies.)

CLASS RESOURCES: Acquisition of the following materials is optional, depending on activities selected by the teacher. Prices are subject to change.

		SEE PAGE(S)
Student References:	Braude, Michael. Andy Learns About Advertising. Minneapolis, MN: T.S. Denison & Co., 1967. $2.00.	20
	Burns, Marilyn. The Book of Think (Or How to Solve A Problem Twice Your Size). Boston, MA: Little, Brown & Company, 1976. $4.95.	38
	Woods, Geraldine. Drug Use and Drug Abuse. New York: Franklin Watts, 1979. $5.90.	4
Books for Independent Reading:	Blue, Rose. A Month of Sundays. New York: Franklin Watts, 1972. $6.90.	54
	Brennan, Gale. My Best Friend Ever. Milwaukee, WI: Ideals Publishing Co., 1980. $2.95.	48
	Burnett, Frances Hodgson. The Secret Garden (A Dell Yearling Book). New York: Dell Publishing Company, 1971. $1.75.	48
	Cole, Sheila R. Meaning Well (A Dell Yearling Book). New York: Dell Publishing Company, 1974. $ .95.	48
	Fitzhugh, Louise. Harriet the Spy (A Dell Yearling Book). New York: Dell Publishing Company, 1978. $1.75.	48

CLASS RESOURCES, CONT'D: SEE PAGE(S)

Gardner, Richard A., M.D. The Boys and Girls Book About Divorce. New York: Bantam Books, 1970. $1.95. 54

Little, Jean. One To Grow On. New York: Simon & Schuster (Archway Paperbooks), 1974. $ .75. 48

Little Jean. Stand In the Wind. (A Harper Trophy Book). New York: Harper & Row, 1975. $2.95. 48

Mann, Peggy. My Dad Lives In A Downtown Hotel. New York: Avon Books, 1973. $1.25. 54

Naylor, Phyllis Reynolds. Getting Along In Your Family. Nashville, TN: Abingdon Press, 1976. $5.50. 57

Palmer, Pat, Ed.D. The Mouse, the Monster and Me. San Luis Obispo, CA: Impact Publishers, 1977. $3.95. 42

Wilt, Joy. A Kid's Guide to Making Friends. Rolling Hills, Estates, CA: B.L. Winch and Associates, 1980. $5.25. 48

_____. Tuff, Stuff. Rolling Hills, Estates, CA: B.L. Winch and Associates, 1980. $5.25. 54

Films/Videotapes: Inside/Out Series. Available free on videotape provided by the school district. (Already acquired by most district resource centers.) For descriptive catalog and information, Contact Bureau of Mass Communications, New York State Education Department, CEC, Room 10A75, Empire State Plaza, Albany, NY 12230.

Suggested Titles:
"Bully" 42
"I Dare You" 50
"Living With Love" 57

Filmstrip: Drugs and Your Body (Filmstrip, cassette, Filmstrip Guide), Chicago, IL: Society for Visual Education, 1971 (not outdated). 7

GRADE FIVE

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will identify various categories of drugs (by action), and discuss how each affects the balance of the human body. TEACHER INFORMATION The fourth grade curriculum broadly covers prescription and over-the-counter drugs. The fifth grade curriculum focuses primarily on psychoactive drugs - both legal and illegal. A psychoactive drug is one which is taken primarily for its effect on emotions or the mind. Psychoactive drugs may be divided into several action categories, depending on how they affect the balance of the body. These include: depressants, antidepressants, narcotics, stimulants, hallucinogens, cannabis and inhalants. The major categories of depressants, stimulants and hallucinogens have been selected for study here, for a somewhat simplified introduction to the topic. (Cont'd on page 7.)	ACTIVITY 1. Definition of Drug Categories List the following three drug categories on the chalkboard. Ask the students to brainstorm both legal and illegal drugs that they think fit under each category. Depressants Stimulants Hallucinogens Have the students copy the lists and check their accuracy. Discuss with the students how depressants, stimlants and hallucinogens affect the balance of the body. Have each student share one new piece of information learned from the discussion. ACTIVITY 2. Drug Information Distribute the worksheet, Drug Information, to the students. Have them complete the chart by choosing one legal drug and one illegal drug to focus on for each category. Have the students share the information they recorded. SUPLEMENTARY ACTIVITIES: ACTIVITY 3. Establish a resource center of student references on drugs and drug abuse in the classroom. Obtain materials for the center from sources listed in the Materials List. (Orders should be placed two to three months in advance.)	Student References: Drug Use and Drug Misuse by Geraldine Woods Drug Abuse Prevention for You and Your Friends (Superintendent of Documents) Materials: Worksheet: Drug Information, p. 5 (one per student) Sources for Student Pamphlets: See Materials List	Science Oral Expression Science

Worksheet: Drug Information

Drug Categories and Definitions	General Body Action	Drug Examples		Medical Use
		Legal	Illegal	
Stimulants: A stimulant is _____ _____ _____ _____				
Depressants: A depressant is _____ _____ _____ _____				
Hallucinogens: An hallucinogen is _____ _____ _____ _____				

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFO. (cont'd) A depressant ("downer") is a drug that slows down the activity of a body organ or process. A stimulant ("upper") is a drug that speeds up the activity of a body organ or process. An hallucinogen is a drug that can produce hallucinations (cause a person to see, hear or feel things that are not actually there).	ACTIVITY 4. Filmstrip Show filmstrip, "Drugs and Your Body," which focuses on the three major categories of drugs and their effects on the body. Have students complete worksheet dittos provided in the teacher's Filmstrip Guide.	Filmstrip: Drugs and Your Body (Society for Visual Education)	Science

GRADE 5 CONCEPT 1

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will differentiate among the proper use, misuse and abuse of drug substances. TEACHER INFORMATION Proper use refers to the use of a drug for its intended medical purpose, as directed by a doctor or on the product label. Drug misuse refers to the use of a drug either in an amount that exceeds a recommended dosage or for an unauthorized or nonmedical purpose. Drug misuse involves taking a drug to fulfill a need which it cannot chemically fulfill. Drug abuse refers to repeated misuse of drugs. An "I learned ..." statement is a technique used to help the student focus on and verbalize information and ideas that they have learned.	ACTIVITY 1. Comparing Proper Use, Misuse and Abuse Write the words "use," "misuse" and "abuse" across the top of the chalkboard. Ask students to differentiate among the proper use, misuse and abuse of drug substances. List in a column to the left on the board ten substances (e.g., aspirin, cold tablets, cough medicine, cough drops, laxatives, diet pills, sleeping pills, tranquilizers, vitamins, etc.) Ask the students to provide the following information for each substance, and record under the proper heading on the board: - An example of proper use - An example of misuse - An example of abuse Ask the students to discuss why some people may misuse, or abuse these substances. Have the students share an "I learned ..." statement. ACTIVITY 2. Rank Order Distribute the worksheet, From Proper Use to Abuse. Have the students order the statements from proper use to abuse by placing a number from 1 (proper use) to 10 (abuse) next to each sentence. Discuss the order in which the students placed the statements, and allow students time to explain their choices. Have the students speculate why some people misuse or abuse substances.	Materials: Worksheet: From Proper Use to Abuse, p.9	Oral Expression Reading Oral Expression

Name _____ Date _____

From Proper Use To Abuse

Rank order the above statements from proper use to abuse by placing a number 1 (use) to 10 (abuse) next to each sentence.

_____ Francesco takes his vitamins once a day as prescribed.

_____ Father pours everyone a glass of wine at holiday time.

_____ Mother takes tranquilizers every time company is coming for dinner.

_____ Hope sneaks a can of beer to help her get in the mood before she goes out with her friends.

_____ Aaron has a fever so Mother gives him an aspirin.

_____ Mavis likes the taste of cough drops so he sucks them like candy.

_____ Tessa feels she can study better if she smokes marijuana before doing her work.

_____ Bradley has taken allergy pills since he was little, and now he realizes he can't sleep without taking one.

_____ Dominick sniffs gasoline to feel high.

_____ Grandfather has a lung condition but he continues to chain smoke.

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
	ACTIVITY 3. Continuums Present the students with a series of situations. Have them decide where on the proper use - misuse - abuse continuum the situations belong, by circling a number from one to five: Example of Continuum: proper use misuse abuse 1 2 3 4 5 Examples of Situations: - Laura has a cold and takes some cold tablets. She takes a double dose because she wants to go out tonight. - Howard has a big game later today. He wants to be up for it. He takes some uppers that one of his friends is selling. - Shelley can't sleep at night. The darkness and shadows in the room frighten her. She takes one of her mother's tranquilizers. Discuss the continuum, and have student contribute other examples of situations representing use, misuse or abuse.		Oral Expression
TEACHER INFORMATION The examples given fall under the category of misuse if they are one time occurrences which do not demonstrate proper use. If repeated habitually, however, they move closer to abuse. Encourage students to provide examples from TV, books or movies in this activity, to keep the focus impersonal. Avoid prying into the habits of family members.			

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will discuss how drug use can lead to a spiral of increased use, dependency and tolerance. TEACHER INFORMATION A drug dependency may be either psychological or both psychological and physical. Psychological dependency occurs when an individual feels that s/he must continue to use a drug to function normally. Physical dependency occurs when an individual uses a drug to such an extent that the body can no longer maintain a balanced state without the drug. When a person stops taking a drug on which s/he is physically dependent, s/he experiences an uncomfortable feeling which is known as withdrawal. Drug tolerance occurs when an individual requires larger doses of a drug to achieve a desired effect, as the body adjusts to the drug to restore its own balance.	ACTIVITY 1. Use-Dependency-Tolerance Spiral a. Introduce the terms, "dependency" and "tolerance" and discuss their general meanings with the students. Introduce the terms, "drug dependency" and "drug tolerance." Ask the students if they can see a relationship between the general terms and these more specific terms. b. Introduce the Use-Dependency-Tolerance Spiral to the class. Allow the students to volunteer explanations for the spiral. If students have difficulty interpreting the spiral, explain the spiral to them. c. Present the following situation to the students. Have them explain how the use-dependency-tolerance spiral operates in this situation: Diane's mother had some family problems. Her doctor prescribed tranquilizers to help her stay calm. As her family problems increased, she continued taking tranquilizers to keep her from from becoming upset. Soon she found she had to take more tranquilizers to calm herself than she did at first. Now Diane's mother doesn't know what to do. The tranquilizers no longer seem to be helping and she still has the family problems. She wants to stop taking the tranquilizers but a friend told her she could become very ill if she does. Have the students relate Diane's mother's experiences to the Use-Dependency-Tolerance Spiral, and discuss what choices Diane's mother has.	Materials: Use, Dependency, Tolerance Spiral, p. 13	Oral Expression

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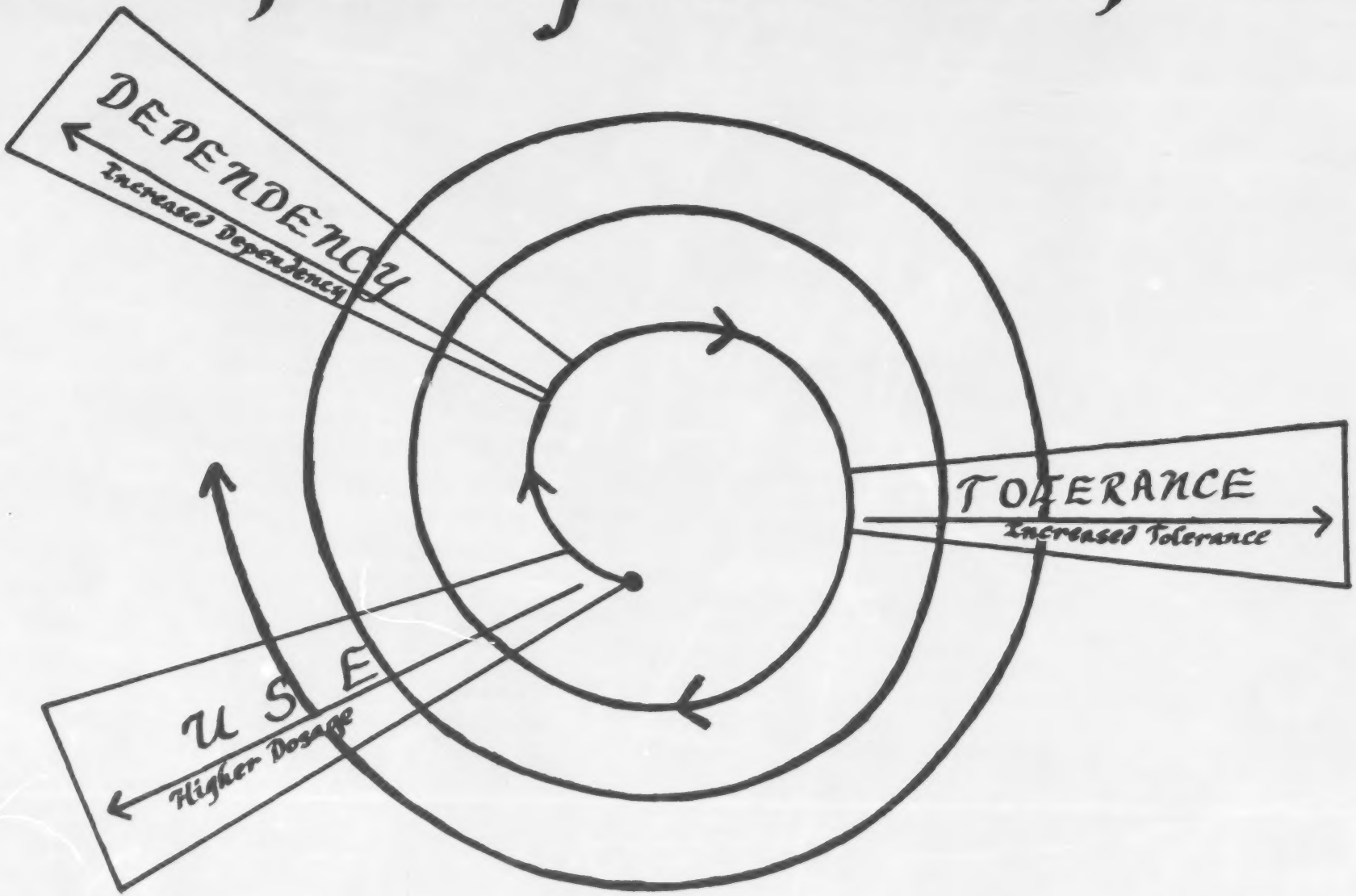
Use-Dependency-Tolerance Spiral



CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
	ACTIVITY 2. Use-Dependency-Tolerance Present the students with the worksheet, Use-Dependency-Tolerance, which contains a series of statements to code with U (use), D (dependency) and/or T (tolerance). Have the students share their responses. Which statements have implications for the use-dependency-tolerance spiral?	Materials: Worksheet: Use-Dependency-Tolerance, p. 17 (one per student)	Reading Oral Interpretation
	SUPPLEMENTARY ACTIVITY:		
TEACHER INFORMATION Activities such as this should be presented with care to avoid conveying the misconception that drug use enabled these persons in some way to attain fame or success.	ACTIVITY 3. Famous People Have the students investigate the lives of people who have had dependency-tolerance problems and present written or oral reports to the class. Examples: Janis Joplin Elvis Presley MacKenzie Phillips John Phillips Marilyn Monroe Judy Garland Relate their methods of using substances to their personal problems.		Reading Oral/Written Expression

GRADE 5 CONCEPT I

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will discuss reasons for substance misuse and abuse. TEACHER INFORMATION Reasons students frequently give substance misuse and abuse include: - "to get high" - "it's fun" - "I can concentrate" - "nothing else to do" - "everyone does it" - "makes me feel better" - "help me forget my problems" - "so I can relax" TEACHER INFORMATION This activity should bring out that people who misuse and abuse substances cannot be characterized into superficial stereotypes. Drug misuse and abuse cut across all dimensions of society.	ACTIVITY 1. Listing a. Divide the students into small groups. Have the students list and rank order the reasons why they think people misuse and abuse substances. Have the students share the lists and identify common ideas among the lists. b. Lead a discussion around the following questions: - Do all people take drugs for all of the reasons? - What drugs do people take for what reasons? - How do people become dependent on drugs? - What alternatives are there to drug-taking to help us with certain feelings? Ask the students to form "I learned . . ." statements to summarize their insights. ACTIVITY 2. Character Sketches Ask the students to write a character sketch of someone who might become a substance abuser. How might the individual look, feel, sound and think? For what reasons might this individual use drugs? How would drug abuse affect the individual? Have students share their character sketches.		Oral Expression Written Expression Oral Expression

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Worksheet: Use-Dependency-Tolerance

Read each statement. Decide if the statement represents Use (U), Tolerance (T) or Dependency: Physical or Psychological (D). Fill in the correct letter in the space provided.

___ 1. Paula thinks she can't get going in the morning unless she has two cups of coffee.
___ 2. Larry drinks two cans of beer to relax. Now he drinks a six-pack to get the same desired effect.
___ 3. Mom has increased the amount of amphetamine pills per day she was taking to control her diet because she has noticed her hunger pains have returned.
___ 4. Bob's brother takes an over-the-counter upper every time he must study late into the evening.
___ 5. Whenever going to a party Frank smokes a joint because he thinks it will increase his fun.
___ 6. Tom has a cold and takes a cold tablet every four hours until his cold symptoms cease.
___ 7. Joe has been injecting heroin six times a day for one year. He decides to stop. He starts to feel sick, has a runny nose and sweats a lot.
___ 8. John has a headache and takes two aspirins to relieve his headache symptoms.

CONCEPT: Drug use affects the balance of the human body.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFORMATION This activity may have to extend over a period of time, depending on current public interest in drug abuse.	ACTIVITY 3. Bulletin Board Have the students collect newspapers and magazine articles about incidents concerning people and psychoactive drug dependency problems. Using the articles, discuss how drug dependency is a factor in accidents. Have students develop a list showing the variety of accidents which may occur.	Materials: Newspapers Magazines	Reading
	SUPPLEMENTARY ACTIVITY:		
	ACTIVITY 4. Independent Reading Have the students read "This Side Up" or "Drug Abuse Prevention for You and Your Friends" to broaden their understanding of substance abuse or locate particular drug information.	Materials: "Drug Abuse Prevention for You and Your Friends" "This Side Up" (Superintendent of Documents)	Reading
	CULMINATING CONCEPT EVALUATION ACTIVITY:		
	Sentence Stems Distribute the evaluation, Sentence Stems, and have the students complete the sentences. After the students have discussed their answers, record the results of their work. Plan additional learning experiences for those students who require further direction and support. Notes reflecting patterns of interest and achievement can be used for future planning.	Materials: Evaluation: Sentence Stems, p. 21	

GRADE 5 CONCEPT II

CONCEPT: Drugs are a major force in our society.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will identify and discuss advertising techniques.	ACTIVITY 1. Advertising Techniques Have the students identify the various techniques used in advertising and collect samples of these techniques for bulletin board displays.	Student Reference: Andy Learns About Advertising by Michael Braude	Reading Consumer Education
TEACHER INFORMATION It is important for students to learn to recognize the general techniques of advertising to enable them to recognize these devices more easily when they are used to sell drug products. Advertising techniques include the following: - Name Calling: catchy or suggestive names are used for the product. - Songs and Slogans (sometimes called the "glittering generalities" approach): a jingle or slogan is invented so people will identify it with the product and remember it. - Bandwagoning: you feel you should use a product because everyone else does. (Cont'd on page 23).	ACTIVITY 2. What the World Needs Now Is ... Have the students create their own "products" and prepare an advertisement that uses one of the six advertising techniques. Display the ads on the bulletin board.	Materials: Drawing paper Markers Tacks or staples	Consumer Education Art
	ACTIVITY 3. Test Market A Product a. Have the students choose a product, and test it to compare it with the way it is advertised. Ask students to report on whether the product does what the advertisement claims and whether the advertisement is accurate, inaccurate or misleading. b. Have the students write letters to the product manufacturers, reporting their findings. Examples of Products to Test: toys cleansers energy-saving devices kitchen utensils deodorants paper towels breakfast cereals shampoos	Materials: Writing paper	Written Expression Consumer Education

Evaluation: Sentence Stems

Complete each sentence using the information you have learned.

1. A stimulant is _____

2. A depressant is _____

3. An hallucinogen is _____

4. Drug use is when _____

5. Drug misuse is when _____

6. Drug abuse is when _____

7. Drug dependency is when _____

8. Drug tolerance is _____

9. A drug I use properly is _____ because _____

10. Drug dependency can be a problem because _____

CONCEPT: Drugs are a major force in our society.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFO. (cont'd) - Testimonials: famous people, authority figures or ordinary people are used to endorse the product. - Transfer: people you may wish to be like or identify with are shown using the product. -Card-Stacking: statistics are interpreted in a way that favors use of a product.			
OBJECTIVE The students will discuss how advertising influences our drug-buying habits and attitudes.	ACTIVITY 1. Brainstorming and Discussion Have students brainstorm a list of reasons why people buy OTC (over-the-counter) drugs. Discuss how each of these reasons can be used to design an advertisement to sell a drug.		Oral Expression Consumer Education
	ACTIVITY 2. TV Ad Survey Have students report on drug product ads seen on TV, answering the following questions: - During what hours are most drug product ads found? - What kind of TV shows contain the most ads for drug products? (Cont'd on next page.)		Oral Expression Consumer Education

GRADE 5 CONCEPT II

CONCEPT: Drugs are a major force in our society.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFORMATION Students can interview family members for this information as a part of their surveys.	ACTIVITY 2. (cont'd) - Have you (or other members of your household) ever purchased a drug product after seeing it advertised on TV? What was it about the advertisement that influenced you (or others) to buy the product? Have students discuss why particular ads are aired at certain times or on certain shows and how this may influence the people who watch them.		
	Select ACTIVITY 1. or ACTIVITY 2.		
OBJECTIVE The students will identify and discuss the techniques used to sell drug products. TEACHER INFORMATION All six of the techniques described on pages 20 & 23 can be used to sell drug products. However, testimonials by authorities are used more often for drugs than for some products, particularly in combination with card-stacking.	ACTIVITY 1. Analyzing Drug Advertisements Have the students collect drug advertisements and analyze the techniques used to sell the drug products. Have students look for trends and record findings in graph form, to determine whether some techniques are used more often than others to sell drugs. Have students discuss the techniques used most often and why they may have been chosen.	Materials: Drug product advertisements (from students)	Consumer Education Mathematics Oral Expression
	ACTIVITY 2. Magazine Ad Survey a. Have students bring in magazines they, or members of their household or families, read. Have them divide the magazines into stacks according to type (e.g., family, news, fashion and glamour, hobby and sport, etc.). Divide students into groups, one per stack of magazines. Have each group record the number of magazines in its "stack," the number of drug product advertisements found in the stack and (Cont'd on next page.)	Materials: Magazines	Consumer Education Mathematics Oral Expression

CONCEPT: Drugs are a major force in our society.

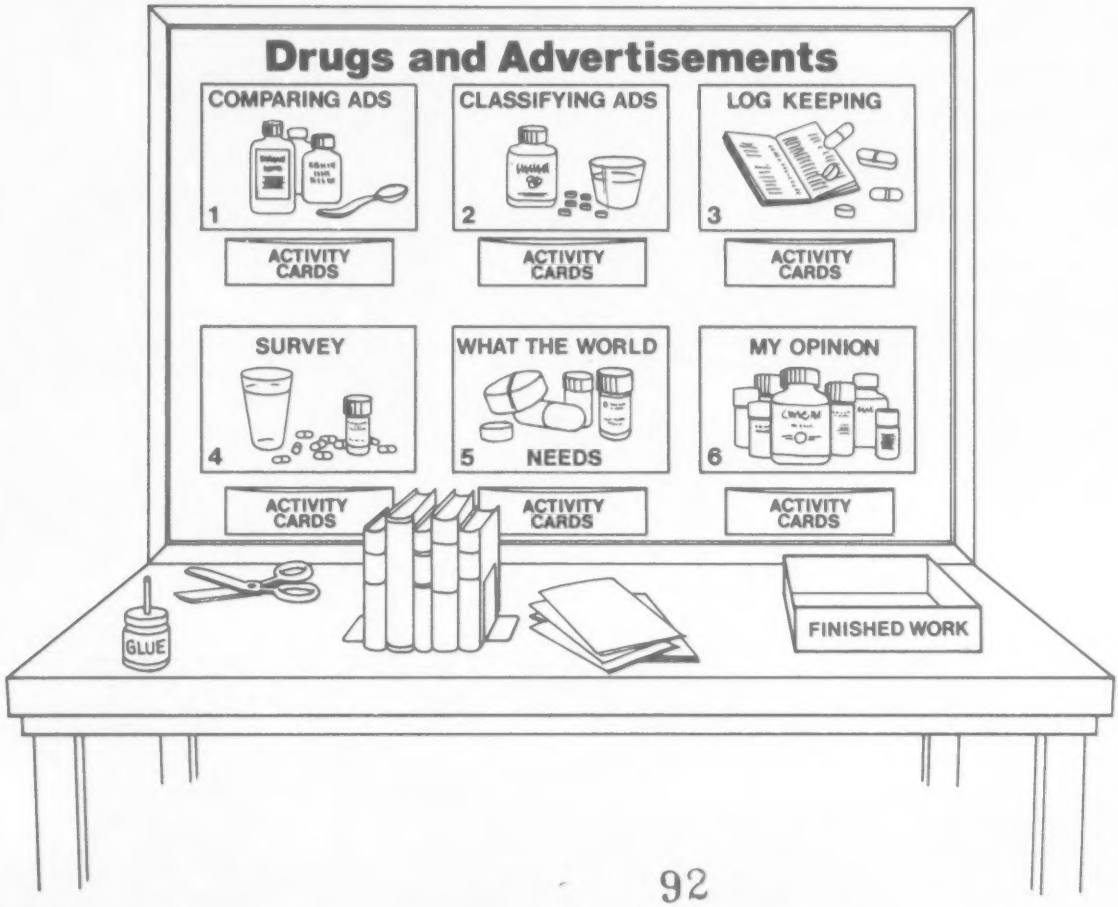
OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
	ACTIVITY 2. (cont'd) calculate an average number of advertisements per magazine. Also, have them identify and record the devices used to sell the products. When research and records are complete, have each group report its results to the class.		
TEACHER INFORMATION This chart could make a good hall display for others in the school to discuss.	b. Have students graph results on chart paper, showing numbers of advertisements and the frequency of use of various advertising devices in different types of magazines.	Materials: Chart paper Markers	
	c. Lead a class discussion around the following questions: - Why are certain magazines chosen more than others to advertise drug products? - Why are different techniques used? - To whom is the appeal directed?		
	SUPPLEMENTARY ACTIVITIES:		
TEACHER INFORMATION The Learning Center may be used in place of Activities 1 and 2, for a more thorough coverage of this topic.	ACTIVITY 3. Learning Center on Drugs and Advertisements Set up a center to get students involved in learning about how drug advertising affects consumer buying habits. (Instructions are provided on the following pages.)	Materials: Bulletin board Table Markers Scissors Magazines Staples or tacks Paste or glue Drawing & writing paper Envelopes (pockets) to hold cards Cards on which to write activities Box or basket for student work	

FIFTH GRADE

LEARNING CENTER ON DRUGS AND ADVERTISEMENTS

DIRECTIONS FOR MAKING THE LEARNING CENTER

1. Cover a bulletin board with colored paper, and place a work table below.
2. Cut-out a series of drug advertisements such as aspirin, cough medicine, cold tablets, etc. to use as illustrations for titles of the activities.
3. Prepare titles for the activities and mount above or below the illustrations.
4. Under each illustrated title, attach a pocket to hold the activity cards.
5. Prepare activity cards and place in pockets.
6. Place materials required by students on the table.
7. Provide a basket for the reports. Periodically check the basket and check the worksheets placed there by the students.



ACTIVITY CARD ONE: COMPARING ADS

Choose a magazine. Cut out the title of the magazine and paste it on the top of a piece of construction paper. Cut out the drug ads from the magazine and paste the ads on the paper. Hang your collection of ads on a bulletin board. Compare the number of drug advertisements in your magazine to the number of drug advertisements in the other magazines. Which magazines have the most drug advertisements? Be ready to talk about this in class.

ACTIVITY CARD TWO: CLASSIFYING ADS

Find drug ads for each of the following advertisement techniques:

Name Calling	Testimonials
Songs & Slogans	Transfer
Bandwagoning	Card-Stacking

Classify your ads by the techniques used and paste on paper. Title each sheet.

Complete the following sentence stems on a piece of paper. Write the sentence stems and your answers.

1. Ads can fool us because_____.
2. One technique I feel is dishonest is_____.
3. Something that is good about advertisements is_____.
4. When I read a drug advertisement I must remember that_____.

After you have answered the questions, place your papers in the basket to be read.

ACTIVITY CARD THREE: LOG-KEEPING

During the next week, while you are watching television, every time you see a drug advertisement, write it down. Keep a log of advertisements you see.

Here is an example of the titles for your log:

Day	Date	Time	Advertisement	Would you use the product? Why?

When your log is completed, answer the following questions:

1. At what times did you see the most drug ads? Why do you think the drugs were advertised at this time?
2. To what audience did the advertisements appeal? Why do you think they were written that way?
3. How do you think drug ads on television influence the people who buy drugs?

After you have completed your log, and answered the questions, place your papers in the basket to be read.

ACTIVITY CARD FOUR: SURVEY

Survey your family and friends. Ask five people to tell you the first thing that comes into their minds when you ask them the following questions:

1. When I say drug advertisements, what is the first advertisement that comes into your mind?

2. What is it about this advertisement that helps you to remember it?

3. Would you buy this product? Why or why not?

4. Would the advertisement influence you to buy this product? Why or why not?

Keep a record in the following way:

Person asked about drug ad	Drug ad that is recalled	Would person buy drug? Why/Why not?	Does ad influence person to buy? Why/ Why not?

Hang your survey on the bulletin board. Compare your survey results with the others. Do you notice any patterns? What are they? Be ready to talk about this in class.

ACTIVITY CARD FIVE: WHAT THE WORLD NEEDS NOW IS...

Create an over-the-counter drug, and write an advertisement for it. Use an advertising technique which you think will get people to buy the product.

On your advertisement, draw a picture of your product. Tell what the product does. Use a technique to appeal to the buying public.

When your advertisement is completed, display it on the bulletin board.

ACTIVITY CARD SIX: MY OPINION

Some people think that since drugs may be harmful to people, they should not be advertised on television. What is your opinión? Write a composition about this. Hang your composition on the bulletin board.

GRADE 5 CONCEPT II

CONCEPT: Drugs are a major force in our society.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will discuss the idea that almost everyone in our society uses drugs. TEACHER INFORMATION Students who feel that everyone does not use drugs may know people who belong to a religion which generally prohibits drug use; may be thinking of people with allergies they do not realize are specific; or may not realize a substance being used is a drug. The important point here is to develop an awareness of the wide range of drug substances people use in everyday life for various reasons.	ACTIVITY 1. Does Everyone Use Drugs? (Discussion) Ask students the question: Does everyone use drugs?" Call upon students who say "yes" to provide reasons for their answers. Then ask if any students in the class disagree. Discuss.		Math Social Studies
	ACTIVITY 2. Opinion Interviews Have the students interview friends and family on the question, "Is America a drug-using society?" Compare the responses from the various interviews. Have the students write their own essays concerning the question.		Oral Expression Written Expression
	ACTIVITY 3. Bulletin Board Have the students collect articles from magazines and newspapers which concern drug use in our society. After reading these articles, have the students write their own articles concerning the issue of drug use in our society. Display the articles on the bulletin board.	Materials: Magazines, newspapers Scissors Writing paper Tacks or tape	Reading Written Expression
Some songs which discuss drug use include: "Coming Into Los Angeles" Arlo Guthrie "Happiness Is A Warm Gun" Beatles (Cont'd on next page.)	ACTIVITY 4. Music About Drug Use a. Have students volunteer to bring in records of songs which discuss drug use. Have the students listen to the records and describe how certain lyrics portray the use of drugs in contemporary society. (Cont'd on next page.)	Materials: Records, Phonograph	Music Oral Expression

CONCEPT: Drugs are a major force in our society.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFO. (cont'd) "Cocaine" Eric Clapton or Jackson Brown "Mother's Little Helper" Rolling Stones "Mr. Tambourine Man" Bob Dylan "Lucy In The Sky With Diamonds" Beatles "Let's Go Get Stoned" Ray Charles	ACTIVITY 4. (cont'd) b. Lead a discussion around the following questions: - How do the song lyrics portray the use of drugs in our society? - How does this portrayal compare with what we have learned about drugs? - Why do you think the musicians portray drugs the way they do? - How do you think this music influences people and their attitudes about drugs? - Does music reflect the "times" or influence the future?		

CULMINATING CONCEPT EVALUATION ACTIVITY:

Evaluation: Fill-Ins

Distribute the evaluation sheet, Fill-Ins. Have the students complete the sheet, and discuss their answers. Plan additional learning experiences for those students who require further direction and support. Record response and interest patterns to assist in future planning.

Materials:

Evaluation: Fill-Ins, p. 35 (one per student)

Evaluation : Fill-Ins

Fill in the advertising technique used in each of the following.

1. "I'm a Pepper, you're a Pepper, he's a Pepper, she's a Pepper, wouldn't you like to be a Pepper too!" _____

2. Phil Esposito sings, "Oh la la, Sassoon!" _____

3. Rosie uses Bounty paper towels, "the quicker picker-upper," in her diner. _____

4. 148,000,000 Americans are protected by Health Insurance of America. _____

5. "Two all beef patties, special sauce, lettuce, cheese, pickles, onions on a sesame seed bun," describes McDonald's Big Mac. _____

6. Mean Joe Green has a Coke and a smile. _____

7. Kent has 0.9 mg. nicotine ... Winston has 1.1 mg. nicotine ... Carlton is lowest with .002 mg. nicotine. _____

8. Delta is an airline run by more than 35,000 professionals. Delta is ready when you are. _____

Some things I learned from this unit are _____

GRADE 5 CONCEPT III

CONCEPT: In making decisions, it is important to select a problem-solving process which is appropriate to our needs.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will compare problem-solving/decision-making techniques, and choose a suitable model for themselves.	ACTIVITY 1. Force-Field Analysis a. Present to the students the following process for solving a problem: Identify the process as a "force-field analysis." 1) Write down the problem. 2) Write down the goal. 3) List the forces moving you toward the goal, from weakest to strongest. 4) List the forces keeping you from the goal, from weakest to strongest. 5) Move toward the goal by dealing with the forces one by one.		Written Expression
TEACHER INFORMATION When individuals are considering an action that has both advantages and disadvantages, the "force-field analysis" method of problem-solving can be used. Force-field analysis gives a graphic representation of forces that help you move toward a goal and forces that will prevent you from reaching a goal. By studying them, an individual can weigh options and choose a course of action.	b. Distribute the worksheet, Force-Field Analysis, and have the students, as a class, work through some sample problems. Students can create their own conditions to embellish each situation, depending on the facility with which they grasp the method. Sample Problems: - You are invited to join the soccer team and the basketball team. They hold practice at the same time, so you can only join one team. Which one will you join? - A classmate you like invites you to his house for the afternoon. He tells you his parents won't be at home and he is inviting some kids over to have fun. He doesn't tell you what you are going to do. Will you accept the invitation?	Materials: Worksheet: Force-Field Analysis, p. 39 (one per student)	Written Expression

CONCEPT: In making decisions, it is important to select a problem-solving process which is appropriate to our needs.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFORMATION For a description of the traditional problem-solving model, see Introductory Section, A Sampling of Teaching Methods.	ACTIVITY 2. Traditional Problem-Solving Review with the students the traditional problem-solving model. Have the students solve a problem as a group using the traditional method. Sample Problem: - You were offered two after-school jobs. One job requires that you help to put away equipment in an afternoon recreation center, the other job requires that you distribute circulars. Both jobs pay the same money. Which job will you take?		Oral Expression
	ACTIVITY 3. Comparing Problem-Solving Techniques Divide the students into groups. Present them with a class problem. Have some groups solve the problem using force-field analysis. Ask the other groups to solve the problem using the traditional problem-solving approach. Allow the students to share the results. Have the students complete "I learned . . ." statements about the technique most comfortable for them.	Resources Materials: Worksheet: Force Field Analysis, p. 39 (one per student)	Oral/Written Expression
	ENRICHMENT ACTIVITY FOR THE GIFTED: ACTIVITY 4. More Ways to Solve Problems Have students research additional problem-solving methods they may wish to use and report to the class. Students should provide examples of good applications for the methods they select to report.	Student Reference: The Book of Think by Marilyn Burns	Reading Math Science Oral Reporting

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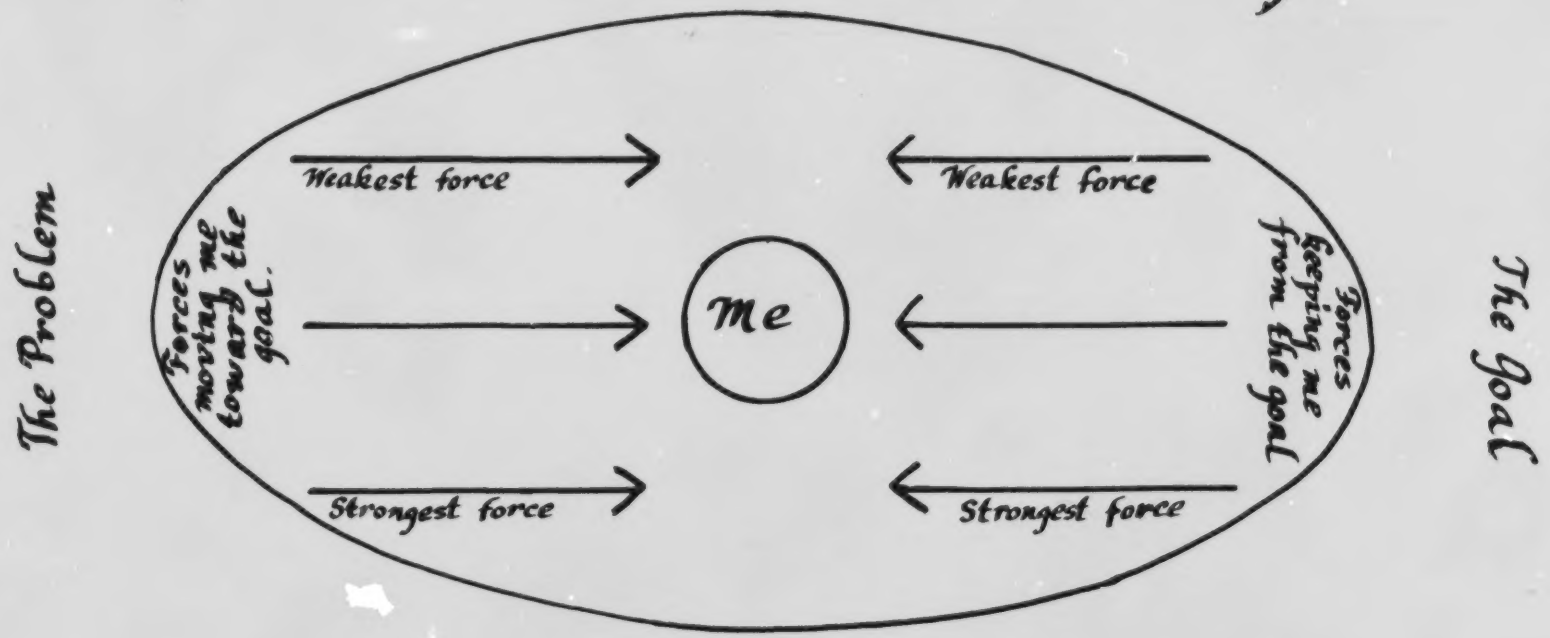
Worksheet: Force-Field Analysis



1. Write your Problem: _____
2. Write your Goal: _____
3. In the force field write some forces helping you to move toward your goal.
4. In the force field write some forces preventing you from reaching your goal.
5. Now write what you will do first in order to solve your problem and reach your goal. _____

GRADE 5 CONCEPT III

CONCEPT: In making decisions, it is important to select a problem-solving process which is appropriate to our needs.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will distinguish between assertive and aggressive methods for implementing decisions. TEACHER INFORMATION Assertiveness skills help people to meet their own needs fairly and without conflict. In acquiring these skills, it is necessary to recognize the fine line that divides "assertiveness" and "aggressiveness." Aggressive behavior contains an overt or implied threat which may be alienating and counter-productive. The emphasis in assertiveness is on a combination of honest, direct expression and tact.	ACTIVITY 1. Assertive vs Aggressive a. Ask students what the word "assertive" means? Then ask them to describe how being assertive differs from being aggressive. Have students provide examples of both assertive and aggressive statements. b. Using a fish bowl technique, have the students describe a time when they were assertive. Then have the students describe a time when they were aggressive. Ask the students to compare the feelings of being assertive to the feelings of being aggressive. c. Present the following situations to the students. Have the students role-play situations where assertive behavior may be required. Sample Situations: - Your brother is misusing your mother's medicine. Your sister and you are aware of this and you are both very concerned. Your brother asks you not to tell your mother. What will you say to your brother? How will you say it? - A friend borrows money from you and doesn't return it. She never has paid you back, and you want the money that is owed you. How will you ask her for the money? How can you tell her you will not lend her money again? Ask the other students to evaluate the responses given. Discuss these behaviors. (Cont'd on next page.)		Oral Expression

CONCEPT: In making decisions, it is important to select a problem-solving process which is appropriate to our needs.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
	d. Discuss: Are there situations in which aggressive behavior is appropriate or necessary? How do we identify these situations?		
TEACHER INFORMATION Since no one style of conversation suits every group of peers, feel free to substitute locally-used phrases on the worksheet.	ACTIVITY 2. Assertive Conversations Have the students write assertive conversations for situations on the worksheet, Assertive Conversations. Discuss and share the conversations.	Materials: Worksheet: Assertive Conversations, p. 43	Oral Expression Tobacco Education
	SUPPLEMENTARY ACTIVITIES:		
	ACTIVITY 3. Independent Reading Students who can benefit from additional help in learning assertiveness skills can read and do exercises in a book written for them on this topic.	Book for Students: The Mouse, the Monster, and Me by Pat Palmer, Ed.D.	Reading
	ACTIVITY 4. Bully Show a film which presents a situation where a "bully" harasses a new boy in school. Have students discuss the meaning of the word "bully" and how assertiveness skills would help solve the problem in the story.	Film (or Videotape): "Bully" from the Inside/Out Series (Bureau of Mass Communications)	Oral Expression
	CULMINATING CONCEPT EVALUATION ACTIVITY:		
	What Would You Do? Distribute the evaluation, What Would You Do? and have the students complete the exercise. Provide time for discussion of their responses. Plan additional learning experiences for those students who require further direction and support. Record response and interest patterns to assist in future planning.	Materials: Evaluation: What Would You Do? p. 45	Written/Oral Expression

WORKSHEET: ASSERTIVE CONVERSATIONS

Read the following conversations. Compare the dialogue.

You are out with your friends at the park. They start to pass a joint around. You turn down their offer for a smoke.

Friend: What's the big deal? It won't hurt you.

You: _____

Friend: What's the big deal? Are you afraid someone will see you?

You: _____

Friend: Chicken!

You: _____

Friend: Okay - That's cool!

You: _____

You are out with friends and someone smokes a cigarette. You don't like to breathe smoke, and you feel it is bad for you.

Friend: I won't blow the smoke your way.

You: _____

Friend: Stop hasseling me!

You: _____

Friend: All right. Maybe you have a point.

You: _____

What Would You Do ?

Solve the problem using a traditional problem-solving/decision-making approach or force field analysis.

Every day when you come home from school, a bully waits to pick on you. Your goal is to get home safely. What would you do ?

You are thinking of joining the bowling club which meets after school. The club meets at the same time as your exercise class. Your goal is to choose one activity. What would you do ?

GRADE 5 CONCEPT IV

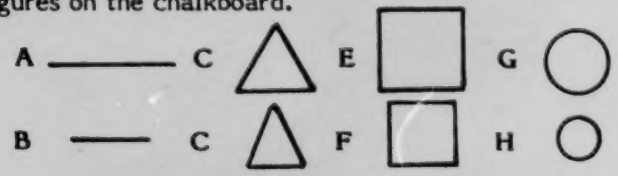
CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will discuss friendships, and ways to maintain and support friendships.	ACTIVITY 1. Feeling Circle Have the students complete the following sentence stems: Friendship means_____ My friends are_____ I keep a friend by_____ Some things I share with friends are_____ I help my friends by_____		Oral Expression
	ACTIVITY 2. Select a. or b.		
	a. Circle of Friends Have the students collect or draw pictures of their friends and create a "Circle of Friends." For each picture have the students supply information such as: - Name: - Age: - A reason for choosing the individual as a friend: - What we do together:	Materials: Photos of friends (students) Drawing paper Markers Double-sided adhesive tape for mounting photos	Written Expression Art
	b. Birds of a Feather Have each student draw an outline of a bird with several tail feathers and cut it out for signing by their friends. The friends can write a brief reason for or message about the friendship.	Materials: Drawing paper Markers Scissors	Art Written Expression
	ACTIVITY 3. Booklets Have the students write and illustrate a book called "A Friend Is Someone Who..." Display the book on the library shelf.	Materials: Drawing paper Markers, crayons Book binding materials	Art Written Expression

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
	SUPPLEMENTARY ACTIVITY:		
TEACHER INFORMATION The book A Kid's Guide to Making Friends is an appealing self-help book that presents universal principles. It should be noted, however, that the introduction mentions God.	ACTIVITY 4. Independent Reading Have students read books about friendships and prepare book reports to share their reactions with the class.	Some Books About Friendships: A Kid's Guide to Making Friends by Joy Wilt Meaning Well by Sheila Cole Harriet the Spy by Louise Fitzhugh One to Grow On by Jean Little My Best Friend Ever by Gale Brennan The Secret Garden by Frances Hodgson Burnett Stand In the Wind by Jean Little	Reading
OBJECTIVE The students will identify their peer groups and explain how a peer group influences feelings and behaviors.	ACTIVITY 1. Peering at Your Peers Have the students complete a survey of their peers. Examples of information to be obtained can include: Names of Peers: Ages of Peers: Dress: Hair Style: Activities: Have the students look for patterns of commonality. How are they like their peers? Ask students to share an "I learned..." statement from their surveys.		Oral Expression

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
	ACTIVITY 2. Where Do I Fit? Distribute to the students the worksheet, Where Do I Fit? Have the students place themselves along the continuums in terms of the categories. Have them compare their continuums and share an "I learned..." statement.	Materials: Worksheet: Where Do I Fit?, p. 51 (one per student)	Written Expression
	SUPPLEMENTARY ACTIVITIES:		
TEACHER INFORMATION The effectiveness of this "experiment" will obviously depend not only on how vulnerable selected students are to peer pressure, but also how convincingly serious the class and teacher can be in playing their roles. Usually, the experiment has the following results: at first, absented students vote against the class, giving the correct answers. As the questions are repeated several times, however, they notice others are voting differently. In the end, a majority change their answers to conform to those of the class. (Tip: it helps if absented (Cont'd on next page.)	ACTIVITY 3. Conformity Send 2 or 3 students out of the room on an errand. While these students are out of the room, reveal to the class that you and they are going to conduct an experiment in group pressure. Draw pairs of geometric figures on the chalkboard.  Explain to the class that when the other students return you will be asking the class questions about the relative sizes of the pairs of figures on the chalkboard, and that they should always respond with the opposite answer to the correct one. For example, when you ask them to vote on the shorter line, they will choose Line A; on the bigger circle, they will choose Circle H. The absented students, however, will not receive these instructions. When the students reenter the room, explain that everyone is (Cont'd on next page.)		Oral Expression

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFO. (cont'd) students are selected from those who normally sit where they will see the votes of the rest of the class.)	ACTIVITY 3. (cont'd) going to test their vision. Ask the class to vote on the answers to questions like those previously discussed. Keep asking until absented students change their votes to conform to those of the class (if they do). Evaluate the experience with the class. Ask the students to describe how they felt when they were the only ones to have different responses. Have the students describe how this type of pressure works in social situations, advertising, politics and dress. Have the students share an "I learned..." statement.		
	ACTIVITY 4. Group Pressure and Dares Show film "I Dare You." Have students discuss situations where they were involved with dares. Ask "Are there alternative ways to handle dares without losing face?" Have student volunteers role-play a dare situation. Have the class provide as many different solutions and endings as possible.	Film: "I Dare You," from Inside/out Series (Bureau of Mass Communications)	Oral Expression Safety

WORKSHEET: WHERE DO I FIT?

Place yourself on these continuums by drawing a stick figure where you belong on each line.

completely individual	DRESS	just like my peers
completely individual	PASSTIMES	just like my peers
completely individual	HAIRSTYLES	just like my peers
completely individual	ACTIVITIES	just like my peers

GRADE 5 CONCEPT IV

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will discuss dependency needs and ways of managing these needs. TEACHER INFORMATION Physical needs include food, shelter and a healthy body. Psychological needs include security, love and a sense of some control over self and environment. A more sophisticated classification has been described by psychologist Abraham Maslow, who identified the following five need categories: 1) physical needs 2) safety needs 3) love needs 4) esteem needs 5) self-actualization needs These needs are arranged in hierarchical order, with the first category being the most basic.	ACTIVITY 1. Needs (Brainstorming and Discussion) Present the categories of Psychological Needs and Physical Needs on the chalkboard. Have students list as many needs as they can under each heading. Have the students discuss how these needs can be satisfied. Then have them discuss how some people try to satisfy the needs with drugs. Have the students prepare an "I learned..." statement to share with the class. ACTIVITY 2. Desert Island Tell the students to imagine they are going to be placed on a desert island. Only five people will be there with them. They must pick five people that they can take along. Distribute the worksheet, The Desert Island, and have the students complete the sheet. Have the students share their sheets. Finally, have them write an "I learned..." statement to share.	Materials: Worksheet: The Desert Island. p. 55 (one per student)	Oral Expression Written/Oral Expression

GRADE 5 CONCEPT IV

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFORMATION A forced choice involves a necessity to make a decision between two equally attractive or unattractive choices. For this activity, students can write their reactions in a paragraph and place in a box. Students can then take turns selecting a paragraph at random and reading it to the class for reactions and discussion.	ACTIVITY 3. Forced Choice Create paragraphs which involve a forced choice. Have the students make a choice, and determine the need that they satisfied by that choice. Examples: Home or Ballgame? A friend you haven't seen since last summer is coming to see you. Your father comes home with tickets for the World Series. Sandwich or Candy Bar? You are feeling hungry. you go to the kitchen to make a sandwich but see two candy bars on the table. Drink - Fun? Your friends sneak into the kitchen and get a beer from the refrigerator. They start to drink it and pass it around. You hate beer but if you don't drink it they'll make fun of you.		Reading Written/Oral Expression
	SUPPLEMENTARY ACTIVITIES: ACTIVITY 4. Independent Reading Students may benefit from reading, on their own, a book designed to help them handle common crisis situations in their lives.	Self-Help Book: Tuff Stuff By Joy Wilt	Reading
TEACHER INFORMATION The school librarian may be able to suggest additional books for use in this activity.	ACTIVITY 5. Independent Reading About Families Have students read a book about the importance of families in meeting needs, and prepare a short report entitled "An Idea I Like for Solving a Problem Families Have." Have students volunteer to read their reports for reactions from the class.	Book: Getting Along In Your Family by Phyllis Reynolds Naylor	Reading Written Expression

WORKSHEET: THE DESERT ISLAND

Persons	Skills	Needs They Satisfy For Me
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.
5.	5.	5.

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
TEACHER INFORMATION Students with parents who are separating or divorced have anxieties about needs they feel may not be met as they were when their family was intact. The books opposite can help these children understand and cope with these situations. One way to hand this activity would be to prepare (perhaps with librarian help) a bibliography of self-help books for students, listed by topic. There should be no need for reports on books read.	ACTIVITY 6. Independent Reading - Special Group Some students may benefit from reading, on their own, a book designed to help them cope with feelings common to children of separating or divorcing parents.	Books for Students with Separating or Divorcing Parents: The Boys and Girls Book About About Divorce by Richard A. Gardner, M.D. My Dad Lives in A Downtown Hotel by Peggy Mann A Month of Sundays by Rose Blue	Reading
	ACTIVITY 7. Film Show a film that shows how a community agency works to provide homeless children waiting for adoption with the love they need. Have children discuss if they have ever felt a need for love. How can they express this need? What can they do to help others feel loved?	Film: "Living with Love," from Inside/Out Series (Bureau of Mass Communications)	Oral Expression

GRADE 5 CONCEPT IV

CONCEPT: We influence and are influenced by the groups to which we belong.

OBJ. & TEACHER INFO.	LEARNING ACTIVITIES	RESOURCES	INTEGRATION
OBJECTIVE The students will practice listening in a group situation, and discuss how they feel when others do not listen to them.	ACTIVITY 1. Game: Frustrate the Speaker Divide the class into small groups. Ask one student in each group to describe a humorous situation. Tell the other students that they are not to listen. They may move around, avoid eye contact and ask irrelevant questions. After a brief period, ask the speaker how s/he felt as the students were not listening. Repeat the experience, this time having the students attend to what is being said, using eye contact, and good listening habits. Ask the speaker to contrast the feelings of speaking to a listening group as compared to speaking to a nonlistening group. Repeat the activity, allowing other students to experience the feelings of speaking to a nonlistening group and a listening group. Ask the students to compose an "I learned..." statement.		Oral Expression Active Listening
TEACHER INFORMATION One list is summarized as "The Three A's of Good Listening:" 1) Attention 2) Acceptance 3) Appreciation Note how each adds a positive dimension to communication.	ACTIVITY 2. Listening Rules Draw up a series of good listening rules for class use. Have the students make posters about considerate and supportive listening habits for class display.	Materials: Colored paper or drawing paper Markers, crayons	Oral Expression Art
	CULMINATING CONCEPT EVALUATION ACTIVITY: My Opinion Ask the students to review the activities and learnings from the unit, and complete the evaluation, My Opinion.	Materials: Evaluation: My Opinion, p. 59	Written Expression

Evaluation: My Opinion

1. My favorite activity was _____
_____.

2. An activity that made me feel uncomfortable was _____
_____
because _____
_____.

3. I think the _____ activity
was _____.

4. Some things I learned that I didn't know before are:
_____
_____
_____

5. The most important thing I learned is _____
_____.

THE ALTERNATIVES CONCEPT

The alternatives concept is based on the assumption that substance misuse and abuse occur when people select substances to meet needs which may be better, or more healthfully, met through alternative means. If the individual can be encouraged to identify the specific needs being met by substance misuse or abuse, it should be possible to identify alternatives to drugs for the individual that will meet these needs without the unhealthy consequences which accompany substance misuse and abuse.

While reasons for substance misuse and abuse vary, individuals frequently cite boredom, frustration, powerlessness, pain and a lack of hope for change as motivations. Alternative activities should be provided in the community which involve young people as active participants with responsibilities and opportunities for growth, achievement and contact with positive role models. Individual identity, self-reliance and feelings of self-worth grow from thinking about, planning and doing worthwhile things. Some examples of programs which are based on the alternatives concept are the following:

ALTERNATIVES 2, Florida Ocean Science Institute, 1605 South East Third Court, Deerfield Beach, FL 33441. Involves youth with marine life and skills development in the areas of scuba diving, boat building, etc.

EL TEATRO ESPITITU DE ASTLAN, P.O. Box 592, Placintia, CA 92670. Involves youth in theater-operated techniques such as improvisations, skits, psychodrama and videotaping.

GLOUCESTER EXPERIMENT, Gloucester, MA 01930. Involves youth in all aspects of restoration projects.

OUTWARD BOUND, INC., National Office, 384 Field Point Road, Greenwich, CT 06830.

PROJECT ADVENTURE, P.O. Box 157, Hamilton, MA 01936.

SPARK PROGRAM, New York City Board of Education, 110 Livingston Street, New York, NY 11201. Encourages student decision-making and intellectual, social, cultural and recreational activities as alternatives to drug misuse.

Several activities in the middle and high school grades of this curriculum provide opportunities for youngsters to identify personal alternatives to drugs for meeting needs and handling problems. The list provided on the following pages provides examples for the teacher that are more detailed. This list may serve as a point of departure for class discussion, as a reference for use by individuals, or as a reference for use in developing local alternatives programs.

SOME REFERENCES ON ALTERNATIVES

Cohen, Allan Y. Alternatives to Drug Abuse: Steps Toward Prevention. Madison, WI: Wisconsin Clearinghouse for Alcohol and Other Drug Information, 1975. $.35.

Cohen, Allan Y. The Journey Beyond Trips: Alternatives to Drugs. Center City, MN: Hazelden Educational Services, 1971, $.60.

Glasser, William, M.D. Positive Addiction. Harper & Row Publishers, 10 East 53rd Street, New York, NY 10022, 1976. $8.95.

THE ALTERNATIVES CONCEPT, CONT'D

Messolonghites, Louisa, Editor. Alternative Pursuits for America's 3rd Century. Washington, DC: U.S. Government Printing Office (SN 017-024-00333-6), 1977. $3.10.

National Institute of Mental Health. Effective Coordination of Drug Abuse Programs. A Guide to Community Action, Chapter VII: "Conclusions: Developing Alternatives to Drug Abuse", April 1973.

Silverstein, Lee M. Consider the Alternative. CompCare Publications, P.O. Box 27777, Minneapolis, MN 55427. $5.95.

ALTERNATIVES CHART

Level of Experience	Effect Being Sought	Most Probable Drugs of Abuse	Alternative Examples
Physical	Relaxation	Alcohol, tranquilizers marijuana, barbiturates	Listening to music Yoga Floor exercise Dance and movement training Swimming, fishing Gardening
	Relief from pain	Prescribed drugs, OTC drugs, illegal drugs	Self-hypnosis Biofeedback Exercise (for pain caused by tension)
	Prevention of sickness	OTC drugs, prescribed drugs	Individual physical conditioning, (jogging, exercise, hiking, biking, walking, etc.) Proper nutrition Sanitation, hygiene
	Increased physical energy	Amphetamines, stimulants (cocaine, nicotine, etc.)	Experience in the martial arts (karate, judo, etc.) Competitive athletics Individual physical conditioning, running, bicycling Aerobic dancing Dietary adjustments

ALTERNATIVES CHART, CONT'D

Level of Experience	Effect Being Sought	Most Probable Drugs of Abuse	Alternative Examples
Sensory	Enhancement of sensual experiences (intensification and enrichment of sound, touch, sight, smell and taste)	Hallucinogens (marijuana, STP), cocaine	Creative hobbies (photography, handicrafts, printing, cooking, ceramics, music, perfume making, sachet making, etc.) Physical activity (bathing, swimming) Birdwatching, nature study Plant, seashell, rock, stamp collecting Walking barefoot in sand, mud, grass or a stream
Creative/Aesthetic	Increased creative ability and enjoyment	Hallucinogens, stimulants	Creative hobbies Planning and implementing art shows, plays, etc. Restoration of neighborhood Apprenticeship with local artists, musicians, craftsmen, actors, etc. Non-graded instruction
	Enhancement of imagination	Hallucinogens, amphetamines	Theater games Fiction writing Visiting museums, exhibitions, fairs Experimenting with art materials

ALTERNATIVES CHART, CONT'D

Level of Experience	Effect Being Sought	Most Probable Drugs of Abuse	Alternative Examples
Mental/Intellectual/Spiritual	Ease in problem-solving	All drugs	Self-hypnosis Relaxation techniques Practice in use of problem-solving techniques Memory Training
	Insight into self	Hallucinogens	Group process, counseling Peer counseling Reading biographies, self-help articles and books
	Avoiding mental fatigue	Stimulants	Physical activity Political campaign work Play chess Play a musicial instrument Tutoring
	Search for purpose and meaning in life, and a personal identity	Hallucinogens	Reading Meditation Study of world religions Contemplation Gardening Nature Study Participation in religious activities
	Desire for higher levels of consciousness	Hallucinogens	Poetry writing Spiritual dance and song Meditation

ALTERNATIVES CHART, CONT'D

Level of Experience	Effect Being Sought	Most Probable Drugs of Abuse	Alternative Examples
Emotional	Reduction of stress, tension, anxiety loneliness	Tranquilizers, barbiturates, marijuana, alcohol	Peer counseling Relaxation techniques Biofeedback Volunteer work as Big Brother/Sister Storytelling
	Avoidance of problems and decisions	All drugs, including combinations of drugs	Supervised psychodrama Peer counseling Problem-solving skills development
	Relaxation and mood alteration	Marijuana, alcohol, tranquilizers barbiturates	Relaxation techniques such as imagery, guided fantasy Biofeedback Religious experience
	Relaxation of inhibitions	All drugs, especially alcohol	Meditation Yoga Cloud-watching
	Need for privacy	Hallucinogens, barbiturates	Gardening, farming Camping, backpacking
Social/Political	Peer pressure; need to feel a sense of belonging	All drugs, including combinations of drugs	Team sports Committee or volunteer work Political campaign work
	Rebellion, defiance, assertion/independence	All drugs, especially illegal substances	Auto and motorcycle repair, racing Volunteer work Recycling and working to improve environment Political campaign work
	Promote social change	Marijuana, barbiturates, alcohol	Volunteer work; social service Tutoring Ecology action Run for office; political field work

ALTERNATIVES CHART, CONT'D

Level of Experience	Effect Being Sought	Most Probable Drugs of Abuse	Alternative Examples
Recreational	Escape from boredom	All drugs, including combinations of drugs	Joining a school club Team sports Apprenticeship Body building Hiking, walking Hobbies, puzzles
	Curiosity	All drugs, including mixing drugs	Science lab work Gardening Building and flying model aircraft Skin and scuba diving Exploring
	Excitement, a new experience, a high, a changed perception	All drugs including mixing drugs	Tutoring Collecting Roller skating Ice skating Biking Cooking Running
	Need for risk-taking, adventure	All drugs, including mixing drugs	Skin and scuba diving Mountain climbing Debating Environmental work Travel Speluncing Hot-air ballooning White-water canoeing, kayaking Orienteering

PEER LEADERSHIP PROGRAMS

Peer leadership programs use the impact and modeling characteristics of peers to influence same age or younger students in developing attitudinal and behavior patterns. Peer leaders may be particularly effective in areas such as substance abuse where the information and guidance provided by adult teachers may be viewed by some students with suspicion, or as irrelevant to the problems young people share.

Where peer leadership methods are used, participating leaders should be carefully selected and trained to insure that they have a positive influence on the children they lead. Many program variations are possible - classroom presentations, group discussion-leading, and individual support are some examples - and peer leaders need to acquire specific skills for each function they perform.

School administrators, teachers, students and parents should all be involved in the planning and implementation of a peer leadership program. For further information, consult one or more of the references listed below.

REFERENCES ON PEER LEADERSHIP

Brown, William. Student-to-Student Counseling. An Approach to Motivating Academic Achievement (Revised Edition). Hogg Foundation Research Series. Austin: University of Texas Press, 1977. $10.95.

Fletcher, Kenneth R., et. al. Extend: Youth Reaching Youth. Minneapolis, MN: Augsburg Publishing House, 1974. $3.95.

Hebeisen, Ardyth. Peer Programs for Youth. Minneapolis, MN: Augsburg Publishing House, 1973. $3.50.

Myrick, Robert and Tom Erney. Caring and Sharing. Minneapolis, MN: Educational Media Corp., 1978. $6.95.

_____. Youth Helping Youth: A Handbook for Training Peer Facilitators. Minneapolis, MN: Educational Media Corp., 1979. $6.95.

National Institute on Drug Abuse. Teen Involvement for Drug Abuse Prevention. Washington, D.C.: U.S. Government Printing House (SN 017-024-00714-5), 1978. $2.75.

National Institute on Drug Abuse. Teen Involvement for Drug Abuse Prevention - Administrators Guide. Washington, D.C.: U.S. Government Printing House (SN 017-024-00713-7), 1978. $1.60.

Samuels, Don and Mimi Samuels. The Complete Handbook of Peer Counseling. Atlanta, GA: SAAETP, Inc., 1975. $5.95. (A classic reference; also available from CompCare Publications and Hazelden Educational Services.)

PACKAGED PROGRAMS FOR HEALTH AND DRUG EDUCATION

Nationally-Validated Programs for Drug Abuse Prevention

THE ME/ME DRUG PREVENTION EDUCATION PROGRAM

ME/ME is a drug prevention/education program for elementary level children (grades 2-6). The program focuses on the reasons why people abuse drugs rather than on the drugs themselves. Activities are student-centered; they emphasize decision-making, values, self-concept, and attitude development. ME/ME is implemented by regular classroom teachers after a six-hour training session by Project ME/ME staff. Details regarding the ME/ME program may be obtained from Artie Kearney, Director, ME/ME Project, 400 South Linwood Avenue,, Appleton, Wisconsin 54911 or the Bureau of Drug Education, New York State Education Department, Room 960 EBA, Albany, New York 12234. Area Code 518: 474-1492.

THE OMBUDSMAN PROGRAM

The Ombudsman program is a drug education/primary prevention program for students in grades 5 and 6. It is designed to reduce certain psychological and attitudinal states closely related to drug use (rebelliousness, low valuing of school, poor student/teacher relationships and low self-esteem). The program is divided into three basic segments: (1) self-awareness and values clarification, (2) communication skills, decision-making and problem-solving, and (3) outreach projects and ideas for school and community. A three-day training session for teachers, counselors and other school personnel is recommended before implementing the program. Program details may be obtained directly from Chris Jones, School Team Director, Charlotte Drug Education Center, 1416 East Morehead, Charlotte, North Carolina 28204. Further information is available from the Bureau of Drug Education, New York State Education Department, Room 960 EBA, Albany, New York 12234. Area Code 518: 474-1492.

Nationally-Validated Programs for Comprehensive Health Education

PRIMARY GRADES HEALTH CURRICULUM PROJECT (PGHCP)

The PGHCP is a sequential health curriculum for students in grades K-3. A companion program to the School Health Curriculum Project (see next page) the PGHCP has been designed to assist children to make informed decisions about personal health practices. Grade level emphases vary, but most areas of health are covered. The design of the State Tobacco Education Curriculum and of this State Drug Education Curriculum allow them to be easily inserted in this program. Training for a school team and the purchase of materials is required before implementing the curriculum.

For more information regarding the PGHC Project, contact Nancy L. Evans, Project Associate, National Center for Health Education, School Health Curriculum Project, 901 Sneath Lane, Suite 215, San Bruno, California 94066.

PACKAGED PROGRAMS FOR HEALTH AND DRUG EDUCATION, CONT'D

SCHOOL HEALTH CURRICULUM PROJECT (SHCP)

The SHCP is a sequential curriculum for students in grades 4-7 (only grades 5-7 have been nationally-validated). The curriculum uses a body systems approach to health which is science-oriented. Each grade level focuses on a different body system - the digestive system, the respiratory system, the circulatory system, and the nervous system. A learning centers approach is used with student-centered activities. Teacher training and the purchase of materials is required before implementing the program.

For more information regarding the SHCP Project, contact Nancy L. Evans, Project Associate, National Center for Health Education, School Health Curriculum Project, 901 Sneath Lane, Suite 215, San Bruno, California 94066.

Other Notable Packaged Programs

TEENAGE HEALTH TEACHING MODULES (THTM)

Teenage Health Teaching Modules are presently being developed by the Education Development Center, Newton, Massachusetts, under contract from the Bureau of Health Education, Center of Disease Control, U.S. Department of Human Services. The project expects to increase students' knowledge, heighten their concern, and teach them skills to use in making well-informed health decisions. The project's final product will be a series of short, highly-targeted modules for middle/junior high and high school students. Activities will be designed to be implemented by teachers from a variety of subject areas, e.g., health, home economics, social studies, science, language arts, and physical education. Student modules on the following topics are currently under development: family health, nutrition and fitness, substance use, friendships and relationships, and environmental and community health. Beside student materials, other materials will be developed: resources, a teacher-training component, strategies to involve parents, and an implementation guide to advise administrators wishing to develop health education programs in their school district.

For further information regarding the project, contact Teenage Health Modules, Education Developmental Center, 55 Chapel Street, Newton, Massachusetts 02160.

QUEST: SKILLS FOR LIVING

The Quest program emphasizes development of mental health and life skills at the high school level. The activities were developed based on a survey of over 2,000 high school students to determine the things in life that concern them the most; their answers - feelings, self-concept, friends, family, marriage, parenting, and career - form the basis of this curriculum. Teacher training is provided through summer workshops at the Sagamore Conference Center in Raquette Lake, New York and in on-site workshops are conducted during the school year.

For more information regarding this program, contact Margie Ingram, Quest Coordinator, Sagamore Institute, 110 Spring Street, Saratoga Springs, New York 12866, Area Code 518: 587-8700.

NYS DIVISION OF SUBSTANCE ABUSE SERVICES
BUREAU OF TRAINING AND RESOURCE DEVELOPMENT

The NYS Division of Substance Abuse Services' Bureau of Training and Resource Development can provide three major services for teachers: 1) participation in regionally scheduled training programs to build skills and knowledge related to substance abuse 2) scheduling of current awareness sessions for school-community groups and 3) library services through a Resource Center, located in New York City.

Training Opportunities

Although the primary function of the Bureau is to provide training to staff of agencies funded and monitored by the Division of Substance Abuse Services, teachers can participate in regionally scheduled training as space permits. Training is provided in content areas such as individual, group and family counseling, treatment populations, general issues and prevention. Schedules and applications are available from the Bureau.

Current Awareness Sessions for School-Community Groups

The Bureau accepts requests from schools, community groups, PTAs, etc. for current awareness sessions designed to increase general awareness of the substance abuse problem among parents, teachers, students, school administrations, etc. In addition to specific information on drugs and their effect on the body, sessions on communication skills, family system, parenting and programs tailored to the specific needs of your district are available. Requests for scheduling must be submitted well in advance since the demand for training services is high. For further information, contact: Robert Detor, Deputy Director for Substance Abuse Training and Resource Development, Division of Substance Abuse Services, 350 Broadway, New York, New York 10013, (212) 966-7600.

Resource Center Services

The Resource Center, also located at the above address, is open from 8:30 a.m. to 5:00 p.m. Monday through Friday.

Resources include: 1) 1,500 books in the substance abuse field, 2) journals and newsletters, 3) article reprints, 4) pamphlets and posters and other free materials, 5) a reading room with a microfiche reader, computerized index to journal literature and a complete card catalogue.

Services are available to teachers visiting the Center. Telephone or mail requests for information will also be accepted.

THE FOOD AND DRUG ADMINISTRATION

The Food and Drug Administration can assist teachers in two ways: 1) FDA Consumer Affairs Officers can provide pamphlets, article reprints and other information for student and teacher use and 2) Investigators from FDA Resident Inspection Posts can speak with classes regarding the role of the FDA in regulating the safety, quality and effectiveness of items offered for sale in U.S. markets. Do not hestitate to request a speaker because of your geographic distance from an office listed below. These investigators routinely travel throughout the State regarding regulatory matters.

FDA CONSUMER AFFAIRS OFFICERS

DISTRICT/OFFICE	ADDRESS/TELEPHONE	COUNTIES SERVED
NEW YORK DISTRICT		
Brooklyn Office	Consumer Affairs Officer 850 3rd Avenue Brooklyn, NY 11232 212: 9165-5754	Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland, Suffolk, Westchester
BUFFALO DISTRICT		
Buffalo Office	Consumer Affairs Officer 599 Delaware Avenue Buffalo, NY 14202 716: 846-4483	All other counties

FDA RESIDENT INSPECTION POSTS

MAILING ADDRESS	TELEPHONE	QUICK REFERENCE LOCATION
FDA Resident Inspection Post Clinton and N. Pearl Streets Albany, NY 12207	518: 472-6043	Albany
FDA Resident Inspection Post P.O. Box 1093, Main Office Binghamton, NY 13902	607: 773-2752	Binghamton
FDA Resident Inspection Post Meridan Road, U.S. Border Station Champlain, NY 12919	802: 298-8240	Champlain

THE FOOD AND DRUG ADMINISTRATION, CONT'D

FDA RESIDENT INSPECTION POSTS

MAILING ADDRESS	TELEPHONE	QUICK REFERENCE LOCATION
FDA Resident Inspection Post P.O. Box 217 Hicksville, NY 11802	516: 433-3187	Hicksville
FDA Resident Inspection Post P.O. Box 3198 Newburgh, NY 12550	914: 562-2620	Newburgh
FDA Resident Inspection Post 100 State Street, Room 328 Rochester, NY 14614	716: 263-6286	Rochester
FDA Resident Inspection Post 100 S. Clinton, Room 1217 Syracuse, NY 13260	315: 423-5468	Syracuse
FDA Resident Inspection Post 300 Hamilton Avenue, Room 309 White Plains, NY 10601	914: 428-4318	White Plains

THE MARCH OF DIMES BIRTH DEFECTS FOUNDATION

Teachers are encouraged to use the services and materials available from the March of Dimes to enhance the drug education program. The March of Dimes develops health education materials for schools, as well as youth groups and health professionals. The materials include pamphlets, audiovisuals and exhibits which call attention to preventable birth defects, and urge prospective parents to modify behavior in ways that will protect the health of mother and child. Materials highlighting smoking, alcohol and drug use are included. Many of their health education materials may be obtained free of charge (or on loan) from your local chapter (see below), or from the National Office: Public Health Education Division, March of Dimes Birth Defects Foundation, 1275 Mamaroneck Avenue, White Plains, NY 10605, (914) 428-7100.

FOUNDATION CHAPTERS IN NEW YORK STATE

CHAPTER	ADDRESS	TELEPHONE	REFERENCE LOCATION
Adirondack Chapter	26 Excelsior Springs Avenue Saratoga Springs, NY 12866	518: 587-9600 or 885-5349	Saratoga Springs
Capital Area Chapter	P.O. Box 5224 Albany, NY 12205	518: 458-1630	Albany
Catskill Area Chapter	219 Quassaick Avenue, Suite 9 New Windsor, NY 12550	914: 562-6400	New Windsor
Central New York Chapter	702 West Belden Avenue Syracuse, NY 13204	315: 422-4752	Syracuse
Genesee Valley Finger Lakes Chapter	21 North Main Street Pittsford, NY 14534	716: 385-1131	Pittsford
Greater New York Chapter	622 Third Avenue New York, NY 10017	212: 682-6430 or 682-1232	New York City
Jefferson Chapter	547 Woolworth Building Public Square Watertown, NY 13601	315: 782-8580	Watertown
Long Island Chapter	2 Robbins Lane Jericho, NY 11753	516: 433-7000	Jericho

THE MARCH OF DIMES BIRTH DEFECTS FOUNDATION, CONT'D

CHAPTER	ADDRESS	TELEPHONE	REFERENCE LOCATION
Niagara Frontier Chapter	1823 Pine Avenue Rooms 207 and 208 Niagara Falls, NY 14301	716: 284-9525	Niagara Falls
Oneida-Mohawk Chapter	414 Trenton Avenue Utica, NY 13502	315: 733-9129	Utica
South Central New York Chapter	349 Chenango Street Binghamton, NY 13901	607: 722-8300	Binghamton
Westchester-Rockland-Putnam Chapter	35 Orchard Street White Plains, NY 10603	914: 949-7166	White Plains
Western New York Chapter	3254 Genesee Street Buffalo, NY 14225	716: 893-4272	Buffalo

PERIODICALS FOR TEACHERS AND STUDENTS

DISTRIBUTOR	TITLE	PRICE	COMMENTS
Alcohol and Drug Problems Association of North America 1101 Fifteenth St., N.W. Suite 204 Washington, DC 20005	Journal of Alcohol and Drug Education (Teachers)	$10/yr.	Quarterly.
Alcohol, Drug Abuse and Mental Health Administration Printing and Publications Management Branch 5600 Fishers Lane (Rm 6C02) Rockville, MD 20857	Prevention Resources (Teachers, administrators)	Free	Bi-annual; emphasizes materials and programs.
Curriculum Innovations, Inc. 501 Lake Forest Avenue Highwood, IL 60040	Current Health 1 (Grades 4-7) Current Health 2 (Grades 7-12)	$3.75 per student for either periodical. Min. order: 15 subscriptions.	Monthly, May-Sept. Frequently features articles relating to substance use, abuse.
	Current Lifestudies (Grades 7-12)	$7.90/yr (9 issues); $3.95/yr for 15 or more subs.	Designed for classroom use. Deals with human development, interpersonal relationships, psychology, values.
Do It Now Foundation P.O. Box 5115 Phoenix, AZ 85010	Drug Survival News (Teachers, counselors)	$4/yr	Bi-monthly.
Health Services and Promotion Branch Department of National Health and Welfare Ottawa, Ont. K1A 1B4 Canada	Health Education	Complimentary foreign subscriptions extended to facilitate information exchange.	Although directed at Canadians, many articles are of general interest.

PERIODICALS FOR TEACHERS AND STUDENTS, CONT'D

DISTRIBUTOR	TITLE	PRICE	COMMENTS
Narcotics Education, Inc. P.O. Box 4390 Washington, DC 20012	Listen - A Journal of Better Living (Grades 7-12)	$9.50/1-24 subs. 9 mos.	Monthly; includes teaching guide; stresses use of modeling and skills development in prevention.
	The Winner (Grades 4-6)	$3.75/9 mos; $1.00/Teaching Guide	Monthly; lifestyle guidance for substance abuse prevention.
New York State Federation of Professional Health Educators P.O. Box 72 Albany, NY 12201	The Catalyst (Teachers)	$15/yr	Bi-monthly; includes membership in NYSFPHE. News, informative articles, programs, resources, research reports, information on Annual New York State Health Education Conference.
Scholastic Magazines 902 Sylvan Avenue P.O. Box 2001 Englewood Cliffs, NJ 07632	Scholastic Action (Grades 7-9; low reading level)	$1.95/semester	Biweekly (14 issues); teacher edition with bulk subs; integrates adolescent concerns and skills development.
Superintendent of Documents U.S. Government Printing Office Washington, DC 20402	FDA Consumer	$12/yr	Monthly-bi-monthly (10 issues); news and articles regarding drugs and consumerism. Article reprints may sometimes be obtained free of charge.
Up Front, Inc. P.O. Box 330589 Coconut Grove, FL 33133	Street Pharmacologist (Teachers)	$20/yr	Monthly; articles, reviews, news. Attractive, illustrated, interesting.

REFERENCES FOR SCHOOL LIBRARIANS

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
American Guidance Service Circle Pines, MN 55014	The Bookfinder. A Guide to Children's Literature About the Needs and Problems of Youth Aged 2-15.	$31.00	Over 1,000 books indexed by subject, author and title and described in detail. A unique and invaluable reference.
Association for Childhood Education International 3615 Wicsonsin Avenue, N.W. Washington, DC 20016	Excellent Paperbacks for Children	$3.50	Updated periodically; annotations, developmental levels and prices given.
	"Guide to Children's Magazines, Newspapers, Reference Books" by Peter Madden	$.75	Annotated.
R.R. Bowker Company 1180 Avenue of the Americas New York, NY 10036	Books to Help Children Cope With Separation and Loss by Joanne E. Bernstein	$16.25	Developed as a reference for bibliotherapists. Contains descriptive summaries of over 400 books dealing with various life problems for children to read on their own. Interest and reading levels given.
Bureau of Drug Education New York State Education Dept. 960 EBA Albany, NY 12234	Annotated Resource Guide (Alcohol, Drugs & Tobacco) - Elementary Level	Free	Descriptions and ordering information on materials for teacher use, categorized by format and audience. Supply limited.
	Annotated Resource Guide (Alcohol, Drugs & Tobacco) - Secondary Level	Free	
CompCare Publications 2415 Annapolis Lane, Suite 140 Minneapolis, MN 55441	Catalog of Books & Things for Growth-Centered Living	Free	Pictures and describes in detail publications distributed by CompCare, which cover substance abuse prevention, mental health and healthy living in general.
National Clearinghouse for Drug Abuse Information 5600 Fishers Lane Rockville, MD 20857	Publication Status Checklist (periodically updated)	Free	Lists publications of the National Institute on Drug Abuse and indicates current availability.

REFERENCES FOR SCHOOL LIBRARIANS, CONT'D

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
National Humanistic Education Center 110 Spring Street Saratoga Springs, NY 12866	The First Catalog for Humanizing Education	$5.95	Looseleaf ringbinder describing publications in the field of humanistic education, including many classics in affective education and values clarification, under 45 topical headings. All are available from the Center, many at reduced prices.
	Catalog Addendum (produced every three months)	Free	

REFERENCES FOR THE SCHOOL HEALTH OFFICE

DISTRIBUTOR	TITLE AND AUTHOR	PRICE	COMMENTS
Addison-Wesley Publishing Company, Inc. 2725 Sand Hill Road Menlo Park, CA 94025	Drugs: A Factual Account (1980 Edition) by Daniel A. Girdano and Dorothy Dusek	$9.95	Comprehensive reference work on commonly misused and abused drugs. Correlates with educational text used in curriculum: Drug Education Content and Methods.
Bantam Books School and College Marketing Division 2451 South Wolf Road Des Plains, IL 60018	The Pill Book by Harold M. Silverman, Pharm. D. and Gilbert I. Simon, D. Sc.	$3.50	An illustrated guide to the most prescribed drugs in the U.S.
CompCare Publications 2415 Annapolis Lane, Suite 140 Minneapolis, MN 55441 Call Toll Free: 800/328-3330	"Adolescent Chemical Use Chart" by Dennis D. Nelson	$1.00	Illustrates characteristic adolescent behavior as it relates to stages of substance use.
Harper & Row Publishers 10 East 53rd Street New York, NY 10022	The Essential Guide to Prescription Drugs by James W. Long, M.D. (New and Revised Edition)	$8.95	Well-organized, detailed reference with glossary, tables and index to brand and generic name drugs.
Hazelden Educational Services Box 176 Center City, MN 55012	Drug and Alcohol Emergencies by Brent Q. Hafen, Ph.D. and Kathryn J. Frandsen	$4.95	An overview of drugs likely to cause emergencies; signs, symptoms and treatment.
	Drugs Interactions	$3.95	Originally printed in RN Magazine. Contains 16 quick-reference tables; discussion of the why and how of drug interactions and clues to adverse drug reactions.
Intervention Enterprises P.O. Box 84 New Concord, OH 43762	The Book of Chemical Crisis by Floyd Sours	$7.95, plus $1.50 for postage and handling	Directed at crisis workers, but contains much information of interest to general audiences.

REFERENCES FOR THE SCHOOL HEALTH OFFICE, CONT'D

DISTRIBUTOR	TITLE AND AUTHOR	PRICE	COMMENTS
Medical Economics Book Div. Box 157 Florence, KY 41042	Drug Identification Guide from Physician's Desk Reference (Sixth Edition, 1980)	$6.95	Quick reference guide using color photos; contains directory of poison control centers.
Pantheon Books Division of Random House, Inc. 201 East 50th Street New York, NY 10022	The Medicine Show by the Editors of Consumer Reports Books (1980 Revision)	$5.95	Consumers Union's guide to everyday health problems and products.
Pacific Institute for Research and Evaluation Suite 1006 7101 Wisconsin Avenue Bethesda, MD 20014	"How to Talk to Kids About Drugs" by Suzanne Fornaciari	$2.50	A practical guide to communicating with youngsters positively.
PDR Physician's Desk Reference Box 58 Oradell, NJ 07649	Physician's Desk Reference	$15.00, plus postage	Classical, comprehensive; updated annually.
Random House, Inc. 201 East 50th Street New York, NY 10022	The American Medical Association's Handbook of First Aid and Emergency Care	$5.95	Easy reference guide with 8-page section on drug abuse.
U.S. Dept. of Justice Drug Enforcement Administration Washington, DC 20537	"Drugs of Abuse", reprinted from Drug Enforcement	Free	Color-illustrated categorical booklet with uses & effects chart.

REFERENCES FOR SCHOOL ADMINISTRATORS

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
Addison-Wesley Publishing Co., Inc. 2725 Sand Hill Road Menlo Park, CA 94025	Drug Education: Content and Methods (Third Edition) by Daniel A. Girdano and Dorothy Dusek	$9.95	Includes section: Planning the Drug Education Program, as well as drugs and methods of presentation to students.
Allyn & Bacon, Inc. 470 Atlantic Avenue Boston, MA 02210	Building Effective Home-School Relationships by Ira J. Gordon and William F. Breivogel	$16.95	A practical guide for achieving a partnership between home and school. Suggests the use of Home Visitors as catalysts for parent involvement.
Hazelden Literature Box 176 Center City, MN 55012	Harmfully Involved by William O. Manning and Jean Vinton	$4.95	Discussion of what can be done to prevent drug abuse in the district.
Lyle Stuart, Inc. 120 Enterprise Ave. Secaucus, NJ 07094	Drugs Don't Take People, People Take Drugs by Eugene H. Kaplan, M.D. and Herbert Wieder, M.D.	$8.00	A discussion of the causes of drug abuse, myths and misunderstandings and the ineffectiveness of treatment.
The C.V. Mosby Co. 11830 Westline Industrial Dr. St. Louis, MO 63141	Drugs in the Classroom. A Conceptual Model for School Programs by Harold J. Cornacchia, Ed.D. et.al.	$13.95	Includes statistics; psychosocial factors; pharmacological aspects, role of the community; drug education; services; school atmosphere; coordination; evaluation.
	Drugs, Society and Human Behavior by Oakley Ray (Second Edition)	$14.50 (1981 price)	Comprehensive textbook; recommended for those who wish to acquire some basic knowledge about drugs and drug issues.
Superintendent of Documents U.S. Government Printing Office Washington, DC 20402	"Beyond the Three R's: Training Teachers for Affective Education" (SN 017-024-00459-6)	$1.10	Guidelines for training teachers in methods for effective drug education.
	"Doing Drug Education: The Role of the School Teacher" (SN 017-024-00460-0)	$.80	Issues; student needs; enabling objectives for teacher attitudes, skills and knowledge.

MATERIALS OF SPECIAL INTEREST TO MINORITY GROUPS

DISTRIBUTOR	TITLE & AUTHOR	LEVEL	PRICE (1980)	COMMENTS
American Indian Historical Society 1451 Masonic Avenue San Fransisco, CA 94117	The Weewish Tree: A Magazine of Indian America for Young People	Elementary - Middle	$6.50/yr (6 issues); bulk rates	Attractive, illustrated 2-color booklet with stories and facts for Native American children of all tribes.
Avon Books Sixth Floor 250 West 55th Street New York, NY 10019	The Me Nobody Knows: Children's Voices from the Ghetto ed. by Stephen Joseph	Junior High - Adult	$1.75	Poetry, letters and thoughts of ghetto school children.
B. L. Winch & Associates 45 Hitching Post Dr., Bldg. 2 Rolling Hills Estates, CA 90274	The Value of Responsibility: The Story of Ralph Bunche by Ann Donegan Johnson	Grades 2-5	$6.95	Color-illustrated story book-style biography of a remarkable man whose willingness to take responsibility, beginning as a child, took him far.
Bureau of Mass Communications Cultural Education Center Empire State Plaza Albany, NY 12230	The First Americans	Junior - Senior High	Free on school videotape	Videotape series for Native Americans. Tapes 8 & 9 deal with alcohol and drug abuse.
Charles E. Merrill Pub. Co. 1300 Alum Creek Drive Chapel Hill, NC 27514	Teaching Children of Different Cultures in the Classroom: A Language Approach by Arnold Cheyney	Teachers	$7.95	For elementary classrooms.
Do It Now Foundation P.O. Box 5115 Phoenix, AZ 85010	Many pamphlets available in Spanish. (Examples: "PCP;" "Alcohol/Drug Combinations;" "Substance use and Safety")	Senior High - Adult	$.15 each	Some of these are suggested as resources in the curriculum.
Harcourt Brace Jovanovich 757 Third Avenue New York, NY 10017	Eliza's Daddy by Ianthe Thomas (A Let Me Read book)	Grades 1-3	$1.65	Story about a Black American child who learns her divorced parents still love her.
Howard University Press 2900 Van Ness Street, N.W. Washington, DC 20008	Catalog of publications relating to Black American history and culture.	Senior High - Adult	Free	Some titles would be appropriate acquisitions for high school libraries.

MATERIALS OF SPECIAL INTEREST TO MINORITY GROUPS, CONT'D

DISTRIBUTOR	TITLE & AUTHOR	LEVEL	PRICE (1980)	COMMENTS
Lollipop Power Inc. P.O. Box 1171 Chapel Hill, NC 27514	Los Adultos Tambien Lloran (Grownups Cry Too) by Nancy Hazen	All Ages	$1.85	Illustrated story about feeling grief and anger.
National Foundation/March of Dimes Box 2000 White Plains, NY 10602	Tenga Buen Cuidado de SuBebe Antes Que Nazca	Pregnant Women	Free	Information regarding drug use during pregnancy.
National Institute on Drug Abuse 5600 Fishers Lane Rockville, MD 20857	Drug Abuse Prevention Films: A Multicultural Film Catalog. DHEW Pub. No. (ADM) 79-791	Teachers	Free	Summaries of recommended films for use with Asian/ Pacific Islanders, Blacks, Mexican Americans, Puerto Ricans and Native Americans.
Pocket Books 1230 Avenue of the Americas New York, NY 10020	Black Child Care: How To Bring Up A Healthy Black Child in America by James P. Comer, M.D., and Alvin F. Poussaint, M.D.	Parents and Teachers	$2.50	A comprehensive guide, organized by age levels. Question and answer format.
Superintendent of Documents U.S. Government Printing Office Washington, DC 20402	Can Drug Abuse Be Prevented in the Black Community? (SN 017-024-00534-3)	Adults	$1.30	Illustrated booklet can be used to promote discussion.
	Come Closer Around the Fire. Using Tribal Legends, Myths and Stories in Preventing Drug Abuse. (SN 017-024-00821-4)	Teachers	$1.50	For all ages. Includes a bibliography and lists of additional resources for Native Americans.
	Growing Up and Feeling Powerful As An American Indian (SN 017-024-00827-3)	Grades 4-6	$1.20	Illustrated poems that promote identity and a positive self-image among American Indian Children.
Vintage Books Division of Random House Education Department LHS 201 East 50th Street New York, NY 10022	The Death and Rebirth of the Seneca by Anthony F. C. Wallace	Senior High-Adult	$5.95	The history, ethnology, psychology and renaissance of a proud tribe of American Indians of the Iroquois Nation.

SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
APOD Publications 1210 Brommer Street Santa Cruz, CA 95062	Raising Children's Self-Esteem	$3.00	Handbooks that can be used individually or with groups. For complete program, combine with teacher resource, The Four Conditions of Self-Esteem. Set of all four books available for $10.95.
	Setting Limits and Rules for Children	$3.00	
	Teaching Children to Be Responsible by Harris Clemes, Ph.D. and Reynold Bean, Ed.M.	$3.00	
Avon Books Sixth Floor 250 West 55th Street New York, NY 10019	Between Parent and Child	$2.50	Classics in adult-child communications, these three books offer discussions of dialogues and guidance for improving effectiveness and understanding.
	Between Parent and Teenager	$2.50	
	Teacher & Child. A Book for Parents and Teachers. By Dr. Haim G. Ginott	$2.50	
Bantam Books, Inc. 666 Fifth Avenue New York, NY 10019	The Parents Book About Divorce by Richard A. Gardner, M.D.	$2.95	Comprehensive and constructive, practical guide to helping children survive the emotional trauma of divorce.
Beacon Press, Inc. 25 Beacon Street Boston, MA 02108	Talking About Death	$3.95	Illustrated dialogues between parent and child, including a parent's guide for use.
	Talking About Divorce and Separation by Earl A. Grollman	$3.95	
Blue Cross/Blue Shield (See NYSED's Annotated Resource Guide for regional office.)	"Childhood"	Free	Attractive, full color-illustrated booklets.
	"Drug Abuse: Drugs in A Chemical Dependent Society"		
Channing L. Bete Co., Inc. 45 Federal Street Greenfield, MA 01301	"About Your Child's Emotional Health"	$.75 each; bulk rates	Practical, scriptographic booklets for low reading level audiences.
	"Understanding Adolescence"		
	"What Every Parent Should Know About Drugs and Drug Abuse"		

SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
CompCare Publications 2415 Annapolis Lane Suite 140 Minneapolis, MN 55441	If Only My Family Understood Me by Don Wegscheider	$4.95	A practical guide for all family members to provide perspective and improve family dynamics.
	I Never Saw the Sun Rise by Joan Donlan	$5.95	Private journal of a chemically dependent teenager from experimentation through rehabilitation. An enlightening, emotional true story.
	Just So It's Healthy by Lucy Barry Robe	$2.75	Guide to alcohol and drug use during pregnancy.
Contemporary Books, Inc. 180 North Michigan Avenue Chicago, IL 60601	Family Council. The Dreikurs Technique for Putting An End to War Between Parents and Children (and Between Children and Children) by Dr. Rudolf Dreikurs et. al.	$5.95	A guide to setting up, maintaining and operating a Family Council in the home as a problem-solving method.
Do It Now Foundation P.O. Box 5115 Phoenix, AZ 85010	Drug Abuse: A Realistic Primer for Parents. (1980 Edition)	$.50 bulk rates	Information about drugs and about why children use drugs written for "parents who aren't sure of what drugs are all about."
Doubleday & Co., Inc. School and Library Dept. 501 Franklin Avenue Garden City, NY 11530	Your Child's Self-Esteem by Dorothy Corkille Briggs (Dolphin Books)	$3.95 (paperback edition)	Step-by-step guidelines for raising responsible, productive, happy children.
Essence Publications 168 Woodbridge Avenue Highland Park, NJ 08904	Parents and Problems by Fred Streit, Ed.D. Pamphlet series. Some titles: "Do My Parents Love Me?" "Do My Parents Understand Me?" "Why Can't I Do It My Way?" "But They're My Friends"	$1.00 for series (6 pamphlets; bulk rates)	A research-based approach for the prevention of alcohol and drug abuse, delinquency and similar problems among adolescents.

SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
Follett Publishing Co. 1010 West Washington Blvd. Chicago, IL 60607	Survival Handbook for Preschool Mothers (Revised & Expanded) by Helen Wheeler Smith	$2.95	Easy reference and reading for both mothers and fathers.
Hawthorn Books 2 Park Avenue New York, NY 10016	A Parents' Guilde to Child Discipline by Rudolf Dreikurs, M.D.	$3.95	Step-by-step guide to child rearing. Stresses logical consequences method of conflict resolution.
	Child Safety Is No Accident by Jay M. Arena, M.D. and Miriam Bachar, M.S.	$5.95 (paperbook edition)	A comprehensive handbook for the layman on prevention and handling of household emergencies.
Hazelden Educational Services Box 176 Center City, MN 55012	"Points for Parents Perplexed About Drugs" by David C. Hancock	$.60	Advice, discussion questions and suggested reading.
	But I Didn't Make Any Noise About It by Cindy Lewis-Steere	$1.95	A mother's story of recognizing and getting help for her son's drug dependency.
Impact Publishers P.O. Box 1094 San Luis Obispo, CA 93406	Surviving With Kids: A Lifeline for Overwhelmed Parents by Wayne Bartz, Ph.D. and Richard Rasor, Ed.D.	$4.95	Thirty principles clearly explained. Includes comic strip illustrations of negative and positive approaches to situations.
McGraw-Hill Book Company 1221 Avenue of the Americas New York, NY 10020	Helping Your Child Learn Right from Wrong. A Guide to Values Clarification by Dr. Sidney B. Simon & Sally Wendkos Olds	$2.95	Provides 27 strategies to improve parent-child understanding and relationships.
NEA Distribution Center The Academic Building Saw Mill Road West Haven, CT 06516	Public Information Leaflet Assortment (5100-26)	$3.75 pkg. of 25	For distribution to parents, boards of education, PTA's, other community groups.
New American Library, Inc. 120 Woodbine Street Bergenfield, NJ 07621	The Half-Parent by Brenda Maddox	$1.95	A guide to more satisfying stepparent-stepchild relationships.
	How to Parent by Dr. Fitzhugh Dodson	$2.50	Comprehensive guide; includes extensive appendices on toys and books suitable for children.

SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
New American Library, Inc. 120 Woodbine Street Bergenfield, NJ 07621	Parent Effectiveness Training by Dr. Thomas Gordon (Plume Books)	$5.95	Classic reference for raising responsible children.
New York Times Book Co., Inc. Three Park Avenue New York, NY 10016	Voices by Beatrice M. Sparks	$7.95	Four troubled teenagers tell their own stories in interviews with a counselor.
Pacific Institute for Research and Evaluation 7101 Wisconsin Avenue Bethesda, MD 20014	How to Talk to Kids About Drugs by Suzanne Fornaciari	$2.50	Booklet that could be titled "How to Talk to Kids." A six-step method is provided.
Psych/Graphic Publishers Box 28027 San Diego, CA 92128	The Parent Book. The Holistic Program for Raising the Emotionally Mature Child by Harold Bessell, Ph.D. and Thomas Kelley, Jr.	$10.00	A source book of methods and dialogues with a bibliography of suggested children's literature.
Public Affairs Committee, Inc. 381 Park Avenue South New York, NY 10016	"Helping Children Face Crises" "Runaway Teenagers"	$.50 each bulk rates	Public Affairs Pamphlets: other titles available.
G.P. Putnam's Sons	Self-Esteem. The Key to Your Child's Well-Being by Harris Clemes and Reynold Bean	$12.95	Outlines the Four Conditions of Self-Esteem and provides a framework for parents to understand self-esteem, perceive where it needs improvement and foster its growth. Specific, practical and readable.
Simon & Schuster Building Rockefeller Center 1230 Avenue of the Americas New York, NY 10020	The Emergency Book by Bradley Smith and Gus Stevens	$4.95	Life-saving techniques everyone should know illustrated with photographs. Chapters on poisoning and drug overdose.

SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

DISTRIBUTOR	TITLE & AUTHOR	PRICE(1980)	COMMENTS
Superintendent of Documents U.S. Government Printing Office Washington, DC 20402	"An Adolescent In Your Home" (SN 017-091-00202-9)	$1.50	Discussion of problems faced by adolescents and their parents.
	"Child Development in the Home" (SN 017-091-00193-6)	$1.50	Simple guidelines for raising preschool age children.
	"Drug Abuse Prevention for Your Family" (SN 017-024-00742-1)	$1.30	Issues, information and resources for the layman.
	"For Parents Only: What You Need to Know About Marijuana" (SN 017-024-00973-3)	$1.50	Suggest use be accompanied by appropriate awareness program.
	"Parents, Peers and Pot" (SN 017-024-00941-5)	$3.50	A more comprehensive treatment than the above title.
	"A Woman's Choice: Deciding About Drugs" (SN 017-024-00867-2)	$1.30	A lay guide to handling stress when drug use may add to the problem.
	"Why Young People Become Antisocial" (SN 017-024-00795-1)	$.90	Discussion for increasing understanding of causes, prevention.
	"Yours, Mine & Ours: Tips for Stepparents" (SN 017-024-00833-8)	$2.00	Steps to take before and after remarriage to ease family readjustment.
	A Family Response to the Drug Problem: Handbook (SN 017-024-00536-1)	$1.50	Reference books for a parent program that combines chemical awareness with development of improved understanding and
	A Family Response to the Drug Problem: Group Facilitator Guidelines (LSN 017-024-00537-1)	$1.30	skills in communication.
B.L. Winch & Associates 45 Hitching Post Dr. Building 20 Rolling Hills Estates, CA 90274	A Kid's Guide to Understanding Parents by Joy Wilt	$5.25	Appropriate for parents to read together with children, ages 4-10. Addresses adopted, step- and foster, as well as biological, children.

COMMUNICATING WITH DOCTORS AND PHARMACISTS*

MEDICATIONS CAN BE VERY HELPFUL WHEN USED WISELY, BUT THEY CAN BE HARMFUL WHEN WE FAIL TO RESPECT THEIR POTENTIAL AND USE THEM CARELESSLY. EACH OF US HAS TO TAKE RESPONSIBILITY FOR OUR DRUG TAKING BY MAKING SURE WE GET THE INFORMATION NEEDED TO TAKE DRUGS CORRECTLY.

GETTING THE INFORMATION YOU NEED FROM DOCTORS

1. When the doctor prescribes a drug, make sure you understand -
   - What the drug is for
   - When and how to take it
   - How long to take it
   - Things to do or not do
2. Tell the doctor about all the drugs you're taking, including over-the-counter drugs like aspirin or ant-acids.
3. If you drink alcohol, find out if it is safe to do so while taking your drugs.
4. Ask your doctor about generic drug substitutes - they usually cost less and there may be an equivalent substitute.
5. Tell the doctor about any symptoms you may be experiencing, like headaches, dizziness, stomach upset or diarrhea. It is possible that these symptoms may be side effects caused by drugs you are taking.
6. Find out if you should continue taking the medication even if your illness seems to disappear, and for how long.
7. Make a list of any questions you have about the drugs you're taking, and bring it with you to the doctor.

GETTING THE INFORMATION YOU NEED FROM PHARMACISTS

1. Compare prices. Different pharmacies may have higher prices on some drugs, lower prices on others.
2. Ask the pharmacist to help you select over-the-counter drugs that won't interfere with the prescription drugs you're taking.
3. Ask the pharmacist:
   - If your medicine should be taken with or immediately after meals, or on an empty stomach.
   - If there are any foods you should avoid eating or drinking while you are using a medication.
   - If the drug is apt to make you less alert or sleepy, thus limiting activities you can perform safely (such as driving a car or operating power tools).
4. Ask the pharmacist any other questions you may have about the drug prescribed for you or about other medications you are using.
5. Make certain you can read and understand the label on a prescription or OTC drug you have purchased before you leave the pharmacy.
6. If possible, select a pharmacy that uses a patient-profile system (a record of the drugs prescribed for you).

*Adapted from "Communicating with Doctors and Pharmacists," New York State Committee on Prescription Drug Misuse

POSSIBLE SIGNS OF DRUG MISUSE OR ABUSE

Since adolescents go through many changes in appearance, behavior and habits, caution should be taken in concluding that behavior signs within the normal range of variability indicate drug involvement. Certainly no one or two signs should be considered to indicate that substance abuse is the cause. If enough evidence accumulates to cause you to suspect a youngster is drug-involved, using a calm, non-threatening approach that communicates a willingness to listen and provide help where desired provides an atmosphere in which a drug-involved person may perceive s/he has the support necessary to seek help.

GENERAL BEHAVIORAL SIGNS

- A preference for the company of others who are known drug abusers
- Repeated appearance in odd places without known reason (e.g., closets, basements, dark hallways), where drugs can be used privately
- Unusually secretive behavior regarding activities and possessions
- Withdrawal from responsibility
- Increasing irritability, showing unusual outbursts of temper
- Stealing items from home, school, merchants, employers, for sale to others
- Repeated borrowing of money from family members or friends
- Changes in school or work attendance, grades, productivity, discipline
- Loss of interest in previously enjoyed activities, hobbies, friends
- Inappropriate and unexplained wearing of sunglasses accompanied by a reluctance to have the eyes seen (may be to hide constricted or dilated pupils, but also may simply be a fad, modeling behavior or self-consciousness about appearance)
- Loss of interest in physical appearance (but this may also indicate depression)
- General changes in overall attitude, with no other identifiable cause

SIGNS RELATED TO THE USE OF SPECIFIC DRUGS

Glues, Aerosols, Vapors

- Unusual eye watering, nasal secretions
- Drowsiness (to unconsciousness)
- Poor muscular control
- Odor of substance on breath, body, clothes
- Paraphernalia: plastic or paper bags or rags, dry plastic cement or other solvents

Narcotics

- Injection scars (usually on arms)
- Constricted pupils that do not respond to light
- Traces of white powder around nostrils
- Frequent drowsiness, lethargy
- Paraphernalia: syringes, bent spoons, eye droppers, rubber tubing, bottle caps

POSSIBLE SIGNS OF DRUG MISUSE OR ABUSE, CONT'D

Stimulants (Amphetamines, Speed, Cocaine)

- Excessive activity, irritability, anxiety (user has difficulty sitting still)
- May go for long periods without eating or sleeping
- Excessive dryness of mouth and nose (this may also be caused by tension, however)
- Dilated pupils (with large doses)
- Chronically raw nasal membranes (cocaine)

Depressants (Barbiturates, Tranquilizers)

- Symptoms of alcohol intoxication without odor of alcohol on breath
- Disorientation, drowsiness, reduced coordination
- Reduced or unusual lack of interest in school and family activities, accompanied by withdrawal into self

Marijuana

- Odor of burning rope
- Redness of eyes; may be dilated pupils
- Animated, loud talking with inappropriate laughter (early intoxication stage)
- Stuporous (late intoxication stage)
- Paraphernalia, e.g. remnants of marijuana "joints," seeds in pocket linings

Hallucinogens (PCP, Mescaline, LSD)

- Erratic and exaggerated expressions of fear, terror
- Distorted perceptions of time, images, sound, touch
- Extremely unpredictable, irrational, uncontrolled mood and behavior changes

GLOSSARY

AMPHETAMINE: A group of artificially-produced stimulant drugs which mimic the action of the sympathetic nervous system, producing stress-like reactions. Amphetamines are used medically in diet pills.

BARBITURATE: A group of artifically-produced sedative drugs which inhibit the signals produced by the central nervous system. Barbiturates are used medically to reduce anxiety and pain and to treat insomnia.

CANNABIS: The generic name for marijuana. It is used broadly to refer to the marijuana plant, cannabis sativa, and its products.

DEPRESSANT: A drug that temporarily decreases the activity of some vital process or organ. Barbiturates, tranquilizers, sedatives, narcotics and alcohol are examples of depressant drug types.

DILEMMA: A situation in which a difficult decision must be made between two or more choices involving uncomfortable consequences. A moral dilemma is a situation involving one or more moral conflicts.

DRUG ABUSE: Legal and medical definitions of "drug abuse" differ, and may be contradictory. A legal definition might be: the illegal self-administration of substances. Under this definition, an adult alcoholic could not be considered a drug abuser. Some other definitions: 1) the repeated use of a substance for a purpose that it cannot pharmacologically fulfill (medical); 2) a behavior pattern characterized by the repeated use of substances to fulfill an emotional or mental need (psychological); and 3) repeated use of substances in ways that cause harm to self or others (sociological).

DRUG DEPENDENCE: A condition which requires continuous use of a substance to maintain normal functioning. Two types of dependence are usually recognized: psychological and physical. It is now generally agreed that physical dependence involves psychological dependence; however, psychological dependence does not necessarily involve physical dependence. Drug dependency is characterized by a behavior pattern in which there is a compulsive and increasing involvement with the use of a drug and the securing of its supply.

DRUG MISUSE: The improper use of a drug. Drug misuse refers to the use of a drug for any unauthorized or nonmedical purpose. It may refer to taking a medication in any way that does not concur with directions for use or for any purpose which it cannot pharmacologically fulfill.

DRUG TOLERANCE: A condition of the body produced by physical adjustment to the effects of a drug. As adjustment is made, a larger dose may be required to achieve an effect. Thus body tolerance may lead an individual to become involved in a spiraling habit of increased use, increased dependence and increased tolerance.

FORCED CHOICE: A decision which must be made between two equally attractive or unattractive alternatives.

HABIT: A pattern of behavior formed and repeated by an individual to meet a need.

HALLUCINOGEN: A substance that alters perceptions of reality by producing hallucinations (causing a person to see, hear or feel things that are not real). Substances classified as hallucinations produce these effects characteristically. Other drugs may produce hallucinations as side effects when used by some people or in particular circumstances.

HOMEOSTASIS: The condition of normal functioning of the body, characterized as a balanced state. The hypothalamus of the brain functions to maintain homeostasis.

I-LANGUAGE: A form of self-expression which provides others with information about personal needs and feelings.

I LEARNED... STATEMENT: An evaluation method that provides a student with an opportunity for clarifying and summarizing orally or in a written statement something learned in the course of completing an activity. Example: "I learned that I can change my feelings about something by giving myself positive messages instead of negative messages."

I-MESSAGE: A statement worded to let someone know how you feel in a certain situation and why without blaming another for the situation or your feelings. An I-Message usually follows the form: "I feel... when... because...."

INHALANT: A substance which is breathed in, or inhaled, as the primary method of self-administration. Solvents, aerosols and anesthetics are classified as inhalants.

NARCOTIC: A substance which produces lethargy and sleep and reduces pain. Drugs made from opium, or opiates, are narcotics. Narcotics may be categorized as depressants; they are used medically as analgesics.

NEED: Something required in order to live, grow, mature or thrive. Maslow identified a hierarchy of categorized needs: 1) physical needs, 2) safety needs, 3) love needs, 4) self-esteem needs and 5) self-actualization needs. Examples of physical needs include food, shelter, warmth and a healthy body. Examples of psychological needs include safety, security, love, self-sufficiency, self-control and a sense of purpose in life.

NEUROHORMONAL TRANSMITTERS: Chemicals emitted by neurons which cause electrical charges to be transmitted across the synapse (space) between nerve cells. Neurohormonal transmitters thus control the message given to, and received by, all the cells and systems of the body. Neurohormonal transmitters include acetylcholine, norepinephrine, serotonin and dopamine, among probably many other substances. The term neurohormonal transmitter is sometimes abbreviated to neurotransmitter.

PSYCHOACTIVE: Producing an effect on the emotions or the mind. Synonym: psychotropic.

REBOUND: A reaction of the body to the administration of a drug, which occurs after the effects of the drug have worn off. The body reacts to produce an opposite effect equal to or greater than the effect of the drug. A person who takes a stimulant drug, for example, may show symptoms of depression after use of the drug is discontinued.

SIDE EFFECTS: Any effects produced by a drug or medication other than those for which the drug is intended. Most, if not all, drugs produce side effects, and they differ considerably in intensity and in type with the individual and the situation.

STIMULANT: A substance which temporarily increases the activity of the central nervous system. Caffeine, cocaine, nicotine and amphetamines are stimulant drugs.

STRESS: The nonspecific response of the body to any demand made upon it. Eustress is a positive response to the demand which promotes growth and change; distress is a negative response, which causes discomfort and fatigue, illness and/or damage to the body.

TENSION LEVEL: The degree of pressure, activity or stress within the mind and body.

TRANQUILIZER: A depressant drug used to reduce anxiety and tension that reduces the emotional response of the body. Tranquilizers are commonly prescribed, and will potentiate other depressant drugs. Examples of tranquilizers include Librium and Valium.

WITHDRAWAL: A characteristic set of symptoms which occur after the development of drug dependence, when regular use of the drug is interrupted. Also called abstinence syndrome. Delirium tremens is a set of symptoms characteristic of alcohol withdrawal.

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EVALUATION FORM*

1. Activities My Students Liked Best (Title and Page No.): _____

2. Activities My Students Found Uncomfortable: _____

3. Activities I Thought Were Best: _____

4. Activities I Would Not Use (Why?): _____

5. Information That Was Most Helpful: _____

6. Sections I Did Not Use: _____

7. Errors That Should Be Corrected (Page No?): _____

8. Things That Should Be Added: _____

9. How Does This Curriculum Compare With Others You Have Used? (Circle One)

   Best Better Than Most About Average Below Average Worst

10. Other Comments: _____

*When you have completed your Drug Education Unit, please fill in this form, fold, tape or staple, and mail to the Bureau of Drug Education. We look forward to receiving your input.

New York State Education Department
Bureau of Drug Education
Albany, NY 12234

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